


FILE NOW: FILING FEE IS \$61.25

FILED

Jul 02 1998 8:00am  
Secretary of State

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| NONPROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|--|

DOCUMENT # *N 93000004710*  
1. Corporation Name  
*ST. LUKE'S MARTHOMA CHURCH INC.*

|  |   |
|--|---|
| Principal Place of Business<br><i>MARGATE FLORIDA.</i> | Mailing Address<br><i>6101, N.W. 9<sup>th</sup> STREET<br/>MARGATE<br/>FLORIDA 33063.</i> |
|--|---|

3. Date Incorporated or Qualified  
*OCTOBER-19-1993.*

4. FEI Number  
*65-0447074*

Applied For  
Not Applicable

|   |   |
|---|---|
| 21. Principal Place of Business<br><i>ST LUKE'S MARTHOMA CHURCH</i> | 26. Mailing Address<br><i>6101, N.W. 9<sup>th</sup> ST,</i> |
| 22. <i>6101, N.W. 9<sup>th</sup> STREET</i>                         | 27. <i>MARGATE</i>  |
| 23. <i>MARGATE, FL 33063.</i>                                       | 28. <i>FLORIDA</i>  |
| 24. <i>33063</i>  | 25. <i>BROWARD</i>  |
|   | 29. <i>33063</i>  |
|   | 30. <i>BROWARD</i>  |

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?  
 Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  
 Yes  No

9. Name and Address of Current Registered Agent  
*GEORGE KUNCHANDY  
6454 N.W. 65<sup>th</sup> TERRACE  
PARKLAND  
FLORIDA 33067* ERRD

10. Name and Address of New Registered Agent

B1 Name *ALEXANDER MATHEWS*

B2 Street Address (P.O. Box Number is Not Acceptable)  
*6471, S.W. 9<sup>th</sup> PLACE,  
NORTH LAUDERDALE*

B3 City *FL* B5 Zip Code *33068*

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Alexander Mathews* JUN-12-98

| 12. OFFICERS AND DIRECTORS |  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |   |
|----------------------------|--|---|---|
| TITLE                      | <i>P/D</i>                             | 1.1 TITLE   | <i>P/D</i>  |
| NAME                       | <i>REV. P. G. GEORGE</i>               | 1.2 NAME  | <i>REV. T. C. GEORGE</i>  |
| STREET ADDRESS             | <i>744 Newtown Richboyo Road</i>       | 1.3 STREET ADDRESS                                    | <i>5281, S.W. 90 WAY #3</i>                                       |
| CITY-ST-ZIP                | <i>RICHBORO, PA 18954</i>              | 1.4 CITY-ST-ZIP                                       | <i>COOPER CITY FLORIDA - 33328</i>                                |
| TITLE                      | <i>V/D</i>                             | 2.1 TITLE   | <i>V/D</i>  |
| NAME                       | <i>CHERIAN P. KURIAN</i>               | 2.2 NAME  | <i>DR PHILIP GEORGE</i>   |
| STREET ADDRESS             | <i>631 LOWELL LANE</i>                 | 2.3 STREET ADDRESS                                    | <i>3070 N.E. 47<sup>th</sup> ST,</i>                              |
| CITY-ST-ZIP                | <i>DAVIE, FLORIDA 33325</i>            | 2.4 CITY-ST-ZIP                                       | <i>FORT LAUDERDALE FL 33308</i>                                   |
| TITLE                      | <i>S</i>                               | 3.1 TITLE   | <i>S</i>  |
| NAME                       | <i>GEORGE KUNCHANDY</i>                | 3.2 NAME  | <i>ALEXANDER MATHEWS</i>  |
| STREET ADDRESS             | <i>6454 N.W. 65 TERR</i>               | 3.3 STREET ADDRESS                                    | <i>6471, S.W. 9<sup>th</sup> PLACE,</i>                           |
| CITY-ST-ZIP                | <i>PARKLAND, FL 33067</i>              | 3.4 CITY-ST-ZIP                                       | <i>NORTH LAUDERDALE FL 33068</i>                                  |
| TITLE                      | <i>T</i>                               | 4.1 TITLE   | <i>T</i>  |
| NAME                       | <i>M.V. KOSHY</i>                      | 4.2 NAME  | <i>ALEXANDER KURIEN</i>   |
| STREET ADDRESS             | <i>4433, N.W. 89<sup>th</sup> WAY,</i> | 4.3 STREET ADDRESS                                    | <i>15655, CHILLINGSWORTH CT</i>                                   |
| CITY-ST-ZIP                | <i>CORAL SPRINGS, FL 33065</i>         | 4.4 CITY-ST-ZIP                                       | <i>DAVIE, FL 3331</i>   |
| TITLE                      | <i>T</i>                               | 5.1 TITLE   | <i>T</i>  |
| NAME                       | <i>JOHN PHILIPPOSE,</i>                | 5.2 NAME  | <i>P.T. VARGHESE,</i>   |
| STREET ADDRESS             | <i>6217, N.W. 75 WAY</i>               | 5.3 STREET ADDRESS                                    | <i>2144, N.W. 114 TERR</i>  |
| CITY-ST-ZIP                | <i>PARKLAND, FL 33067</i>              | 5.4 CITY-ST-ZIP                                       | <i>CORAL SPRINGS FL 33071.</i>                                    |
| TITLE                      | <input type="checkbox"/> DELETE        | 6.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |  | 6.2 NAME  | <i>100002578801</i>   |
| STREET ADDRESS             |  | 6.3 STREET ADDRESS                                    | <i>-07/02/98--01034--001</i>                                      |
| CITY-ST-ZIP                |  | 6.4 CITY-ST-ZIP                                       | <i>***62.25</i>   |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed from an attachment with an address.

SIGNATURE: *Alexander Mathews* ALEXANDER MATHEWS JUN-12-98 (654)977-8153

CR2E037 (10/97)