

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000007

Entity Name: FATHER VENGAYIL MEDICAL FOUNDATION, INC.

Current Principal Place of Business:

47 TALL OAKS CIRCLE
TEQUESTA, FL 33469

Current Mailing Address:

47 TALL OAKS CIRCLE
TEQUESTA, FL 33469

FEI Number: 26-1652813

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VENGAYIL, THOMAS FATHER
47 TALL OAKS CIRCLE
TEQUESTA, FL 33469 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PVST
Name VENGAYIL, THOMAS FATHER
Address 47 TALL OAKS CIRCLE
City-State-Zip: TEQUESTA FL 33469

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS VENGAYIL

PRESIDENT

04/23/2013

Electronic Signature of Signing Officer/Director Detail

Date