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May 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N47323 (3)
 1. Corporation Name
EBENEZER INDIA PENTECOSTAL CHURCH, INC.



Principal Place of Business 4040 E 540A LAKELAND FL 33813 US	Mailing Address 4040 E 540A LAKELAND FL 33813 US
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3. Date Incorporated or Qualified 02/13/1992		
4. FEI Number 59-3110620	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country 29
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9. Name and Address of Current Registered Agent

GEORGE, JOSEPH
4220 SUNNY LAND DR
LAKELAND FL 33813

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1506, 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 Joseph George **JOSEPH GEORGE** Secretary **4-28-98**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	KURUVILLA, M. V.
STREET ADDRESS	P O BOX 1351 NA
CITY-ST-ZIP	HIGHLAND CITY FL 33848
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	GEORGE, RAJU
STREET ADDRESS	4142 SUNNYVIEW DR
CITY-ST-ZIP	LAKELAND FL
TITLE	DS <input type="checkbox"/> DELETE
NAME	GEORGE, JOSEPH
STREET ADDRESS	4220 SUNNYLAND DR
CITY-ST-ZIP	LAKELAND FL
TITLE	D <input type="checkbox"/> DELETE
NAME	GEORGE, THOMAS
STREET ADDRESS	6633 KITTY FOX LANE
CITY-ST-ZIP	LAKELAND FL 33813
TITLE	D <input type="checkbox"/> DELETE
NAME	CHACKO, MATHEW
STREET ADDRESS	3931 WHITE DOVE DRIVE
CITY-ST-ZIP	LAKELAND FL
TITLE	D <input type="checkbox"/> DELETE
NAME	GEORGE, EAPEN
STREET ADDRESS	3748 FEATHER DR
CITY-ST-ZIP	LAKELAND FL 33813

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	REV. JOHN SAMUEL
1.3 STREET ADDRESS	4015 E, 540A
1.4 CITY-ST-ZIP	LAKELAND, FL. 33813
2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	ROY JACOB
2.3 STREET ADDRESS	3917 SPOONBILL CT.
2.4 CITY-ST-ZIP	LAKELAND, FL. 33813
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 or supplemental 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 the receiver 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, or on an attachment with an address.

SIGNATURE: Joseph George **JOSEPH GEORGE** Secretary **4-28-98** **(841) 6449088**

CR2E037 (10/97)