

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003138

FILED
Apr 30, 2011
Secretary of State

Entity Name: FRIENDS OF BIJNOR, INC.

Current Principal Place of Business:

35 JUNE TERRACE
CANTON, MA 02021

New Principal Place of Business:

24 FRIENDS ST
CONGERS, NY 10920 US

Current Mailing Address:

P.O. BOX 63
CANTON, MA 02021 US

New Mailing Address:

24 FRIENDS ST
CONGERS, NY 10920 US

FEI Number: 11-3056403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LACOSTE, RENE MR.
5219 HAWKESBURY WAY
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: VADAKEL, JOHN RT REV
Address: BISHOP'S HOUSE, PO PAURI DT
City-St-Zip: KOTDWAR, UTTARAKHAND, UP 246149 IN

Title: ST
Name: KURIAN, JOSE MR
Address: 24 FRIENDS STREET
City-St-Zip: CONGERS, NY 10920 US

Title: DIR
Name: LACOSTE, MARK MR
Address: 204 6TH STREET
City-St-Zip: DENTON, MD 21629 US

Title: DIR
Name: KOTTOOR, CYRIAC MR
Address: 90 FIELDSTONE
City-St-Zip: STAMFORD, CT 06902 US

Title: DIR
Name: CLAVELLI, ESTELLE R MS
Address: 35 JUNE TERRACE
City-St-Zip: CANTON, MA 02021 US

Title: DIR
Name: MALIEKEL, SHEILA DR
Address: 910 N LAKE SHORE DR APT. 818
City-St-Zip: CHICAGO, IL 606111588 US

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: ESTELLE RYAN CLAVELLI

DIR

04/30/2011

Electronic Signature of Signing Officer or Director

Date