

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002579

FILED  
May 26, 2009  
Secretary of State

Entity Name: SOUTH FLORIDA TAMIL SANGAM, INC.

**Current Principal Place of Business:**

617, STANTON LANE  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

617, STANTON LANE  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 65-1002914      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

NIRMAL, BHAVANI  
6555 NW 36TH STREET  
SUITE 302  
MIAMI, FL 33166 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: PD ( ) Delete  
Name: RATHINAVELU, APPU  
Address: 617, STANTON LANE  
City-St-Zip: WESTON, FL 33326

Title: VD ( ) Delete  
Name: NARAYANAN, RADHA  
Address: 1975 NW 167TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: JSD ( ) Delete  
Name: RAMALINGAM, LALITHA  
Address: 16461 NW 16TH ST  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SD ( ) Delete  
Name: PARTHASARATHY, GOKUL  
Address: 11230 MISTY RIDGE WAY  
City-St-Zip: BOYANTON BEACH, FL 33473

Title: TD ( ) Delete  
Name: KALAICHEZHIAN, SIVAPRAKASAM  
Address: 8850 WEST FLAGLER ST, # 1  
City-St-Zip: MIAMI, FL 33174

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: RAMASAMY, SRIDEVI  
Address: 401 NW 23RD STREET  
City-St-Zip: BOCA RATON, FL 33431

Title: JSD (X) Change ( ) Addition  
Name: SELVAN, VANITHA  
Address: 920 NW, 96 AVENUE  
City-St-Zip: PLANTATION, FL 33324

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: APPU RATHINAVELU

PD

05/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date