# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 27, 2005**
**Secretary of State**

DOCUMENT# N00000005810

**Entity Name:** SHIVA SHAKTI MANDIR HINDU ORGANIZATION OF ORLANDO, INC.

**Current Principal Place of Business:**

7313 EDNITAS WAY
ORLANDO, FL 32818

**New Principal Place of Business:**

**Current Mailing Address:**

7313 EDNITAS WAY
ORLANDO, FL 32818

**New Mailing Address:**

**FEI Number: 59-3670034** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

RAGHAVENDRA, ALEVOOR PD
7313 EDNITAS WAY
ORLANDO, FL 32818 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: ALEVOOR, RAGHAVENDRA
Address: 7313 EDNITAS WAY
City-St-Zip: ORLANDO, FL 32818

Title: STD ( ) Delete
Name: RAMOO, SAMMY
Address: 7313 EDNITAS WAY
City-St-Zip: ORLANDO, FL 32818

Title: D ( ) Delete
Name: ALEVOOR, LENA
Address: 7313 EDNITAS WAY
City-St-Zip: ORLANDO, FL 32818

Title: D ( ) Delete
Name: RAMESH, RAMKISSOONJ
Address: 7313 EDNITAS WAY
City-St-Zip: ORLANDO, FL 32818

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

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

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

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

Title: D (X) Change ( ) Addition
Name: SAMMY, ANGELA
Address: 7313 EDNITAS WAY
City-St-Zip: ORLANDO, FL 32818

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RAGHAVENDRA ALEVOOR PD 01/27/2005

Electronic Signature of Signing Officer or Director — Date