2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008152

FILED Jan 15, 2008 Secretary of State

Entity Name: HINDU TEMPLE OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:				New Principal Place of Business:			
563 PECK /	-	US		·			
Current Mailing Address:			New Mai	New Mailing Address:			
P O BOX 60 FORT MYE	0845 RS, FL 33906	US					
FEI Number:	05-0536510	FEI Number Applied For ()	FEI Number Not Ap	oplicable ()	Certificate of Status D	esired ()	
Name and	Address of Cu	rrent Registered Agent:	Name ar	nd Address of	New Registered Age	nt:	
The above i	AVENUE RS, FL 33919 named entity su	US Ibmits this statement for the p	urpose of changing	g its registered	office or registered ag	ent, or both,	
in the State	of Florida.						
SIGNATUR		Oissature of Denistrand Ass			Dete		
Electronic Signature of Registered Agent				Date			
OFFICERS	AND DIRECT	ORS:	ADDITIO	ONS/CHANGE	S TO OFFICERS AND	DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () E KRISHNAN, LAKS 10090 MAGNOLIA FORT MYERS, F	A POINTE	Title: Name: Address: City-St-Zip	SUNDARESA 8601 NOTTIN	(X) Change () Addition N, RENGA IGHAM POINTE WAY S, FL 33912 US		
Title: Name: Address: City-St-Zip:	V () E VYAS, MUKESH 406 SE 20TH CT CAPE CORAL, FI	Delete _ 33990 US	Title: Name: Address: City-St-Zip	NANDUR, MA 563 PECK A\			
Title: Name: Address: City-St-Zip:	T () E BUSHAN, RATHN 11341 LONGWA' FORT MYERS, F	TER CHASE CT	Title: Name: Address: City-St-Zip		() Change () Addition		
Title: Name: Address: City-St-Zip:	S () E SUNDARESAN, J 8601 NOTTINGHA FORT MYERS, F	AM POINTE WAY	Title: Name: Address: City-St-Zip	RAJENDRA, I 108SE 12TH			
Title: Name: Address: City-St-Zip:	D () E RAO, MUKUNDA 1503 SUZI ST PUNTA GORDA, I	Delete FL 33950 US	Title: Name: Address: City-St-Zip	KRISHNAN, L 10090 MAGN	(X) Change () Addition AKSHMI OLIA POINTE S, FL 33919 US		
Title: Name: Address: City-St-Zip:	D () E JAIN, USHA 5836 RIVERSIDE FORT MYERS, F		Title: Name: Address: City-St-Zip		() Change () Addition		

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: RENGA SUNDARESAN P 01/15/2008