

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007147

FILED
Mar 11, 2009
Secretary of State

Entity Name: SANATAN MANDIR OF FLORIDA, INC.

Current Principal Place of Business:

1225 ABBERTON DR.
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

1225 ABBERTON DR
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 59-3610993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANOMAN, RAMNARAIN
1225 ABBERTON DRIVE
ORLANDO, FL 32837 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: SEEARAM, MAHINDRANAUTH
Address: 742 CITRUS COVE DR
City-St-Zip: WINTER GARDEN, FL 34787

Title: VPD () Delete
Name: VAIDLANAND, PERSAUD
Address: 109 EAST SILVER STAR ROAD.
City-St-Zip: OCOEE, FL 34761

Title: TD () Delete
Name: HANOOMAN, MAHADEO
Address: 13713 HAWK LAKE DRIVE
City-St-Zip: ORLANDO, FL 34823

Title: ATD () Delete
Name: TILLOKIE, LEELEWATIE
Address: 2726 CAMOMILE DRIVE
City-St-Zip: ORLANDO, FL 32837

Title: S () Delete
Name: HANOOMAN, RAJIV
Address: 13713 HAWK LAKE DRIVE
City-St-Zip: ORLANDO, FL 34823

Title: P () Delete
Name: HANOMAN, RAMNARAIN
Address: 1225 ABBERTON DR.
City-St-Zip: ORLANDO, FL 32837

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

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: RAJIV HANOOMAN

S

03/11/2009

Electronic Signature of Signing Officer or Director

Date