

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005810

**FILED**  
**Mar 17, 2020**  
**Secretary of State**  
**3627273501CC****Entity Name:** SHIVA SHAKTI MANDIR HINDU ORGANIZATION OF ORLANDO, INC.**Current Principal Place of Business:**129 N PINE HILLS RD  
ORLANDO, FL 32811**Current Mailing Address:**129N PINEHILLS ROAD  
ORLANDO, FL 32811 US**FEI Number: 59-3670034****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ALEVOOR, ACHARYA  
129 N PINE HILLS RD  
ORLANDO, FL 32811 US*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:** ALEVOOR ACHARYA**03/17/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	D
Name	ACHARYA, SRIKANTHA A
Address	129 N PINE HILLS RD
City-State-Zip:	ORLANDO FL 32811

Title	D
Name	NANDAKUMAR, RAJENDRA
Address	129 N PINE HILLS RD
City-State-Zip:	ORLANDO FL 32811

Title	PD
Name	ALEVOOR, ACHARYA R
Address	129 N PINE HILLS ROAD
City-State-Zip:	ORLANDO FL 32811

Title	DIRECTOR
Name	ACHARYA, ALEVOOR R
Address	129 N PINE HILLS ROAD
City-State-Zip:	ORLANDO FL 32811

*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:** ALEVOOR R ACHARYA**PRESIDENT****03/17/2020**

Electronic Signature of Signing Officer/Director Detail

Date