

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007665

Entity Name: SRI AYYAPPA SOCIETY OF TAMPA, INC.**Current Principal Place of Business:**6829 MAPLE LANE
TAMPA, FL 33610**Current Mailing Address:**6829 MAPLE LANE
TAMPA, FL 33610**FEI Number:** 59-3682469**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NAIR, RAVI T
6829 MAPLE LANE
TAMPA, FL 33610 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	TRUSTEE	Title	P
Name	PILLAI, AYYAPPAN	Name	RADHAKRISHNAN, CHITTUR V PHD
Address	10207 ESTUARY DR,	Address	12151 JEFFREY LANE
City-State-Zip:	TAMPA FL 33647	City-State-Zip:	DADE CITY FL 33525
Title	TREASURER	Title	ASST. TREASURER
Name	NAIR, RAVI	Name	KATTUPARAMBIL, BIJU
Address	17240 EQUESTRIAN TRAIL	Address	20109 NOB OAK AVENUE,
City-State-Zip:	ODESSA FL 33556	City-State-Zip:	TAMPA FL 33647
Title	TRUSTEE	Title	V
Name	VIJAYAN, VINOD	Name	SWAMINATHAN, RAM
Address	1500 SUNSET RD. C-9	Address	19101 WIND DANCER STREET
City-State-Zip:	TARPON SPRINGS FL 34689	City-State-Zip:	LUTZ FL 33549
Title	TRUSTEE	Title	SECRETARY
Name	PILLAI, A.K. DR.	Name	PANGULURI, SIVA K PHD
Address	12702 NORTH 53RD STREET,	Address	15420 LIVINGSTON AVE, APT # 2206
City-State-Zip:	TAMPA FL 33617	City-State-Zip:	LUTZ FL 33559

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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: RAVI NAIR**TREASURER****04/17/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title ASST. SECRETARY
Name NARAYAN, SHANKAR
Address 12912 ARBOR ISLE DR,
UNIT # 207
City-State-Zip: TEMPLE TERRACE FL 33637

Title CO-TRUSTEE
Name RAJAN, GOVIN T
Address 4906 64TH DR W,
City-State-Zip: BRADENTON FL 34210

Title CO-TRUSTEE
Name THIAGARAJAN, VENKATA
Address 17852 CUNNINGHAM CT
City-State-Zip: LAND O' LAKES FL 34638

Title DIRECTOR
Name YAMUNACHARY, RANGARAJAN
Address 12019 DEACONS CROFT LN.,
City-State-Zip: TAMPA FL 33626

Title CO-TRUSTEE
Name NAIR, SAJEEV K DR.
Address 7090 GRASSLAND CT,
City-State-Zip: SARASOTA FL 34241

Title DIRECTOR
Name NAIR, SREEJESH
Address 10705 PRESERVE LAKE DR,
City-State-Zip: TAMPA FL 33626