

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000010317

**Entity Name:** MAHARASHTRA MANDAL OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

8712 S KENDALE CIRCLE  
LAKE WORTH, FL 33467

**FILED**  
**Apr 07, 2018**  
**Secretary of State**  
**CC3722168186**

**Current Mailing Address:**

10444 NW 59 PLACE  
PARKLAND, FL 33076 US

**FEI Number: 26-1289471**

**Certificate of Status Desired: Yes**

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

AJINKYA, ARVIND B  
4524 GUN CLUB RD  
SUITE #102  
WEST PALM BEACH, FL 33415 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 DIRECTOR  
Name ATHAVALA, MOHINI  
Address 8712 S KENDALE CIRCLE  
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR  
Name MATANGE, APARNA  
Address 15564 NW 12TH COURT  
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR  
Name VAIDYA, NITIN  
Address 3940 W. BROWARD BLVD., #101  
City-State-Zip: FORT LAUDERDALE FL 33313

Title DIRECTOR  
Name SOGAL, SHEELA  
Address 4300 BANYAN TRAILS DR  
City-State-Zip: COCONUT CREEK FL 33073

Title DIRECTOR  
Name TELAVANE, PRASAD  
Address 641 STANTON DRIVE  
City-State-Zip: WESTON FL 33326

Title PRESIDENT  
Name TALWALKAR, SONALI  
Address 570 SAINT MICHELLE WAY  
City-State-Zip: MARGATE FL 33068

Title VP  
Name KULKARNI, RASHMI  
Address 5624 NW 122 TER  
City-State-Zip: CORAL SPRINGS FL 33076

Title TREASURER  
Name SHAH, ROHINI  
Address 10444 NW 59 PLACE  
City-State-Zip: PARKLAND FL 33076

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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: SONALI TALWALKAR**

**PRESIDENT**

**04/07/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            SECRETARY  
Name            KULKARNI, GHANESH  
Address        6174 NW 23RD RD  
City-State-Zip: BOCA RATON FL 33434