

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000005190

**Entity Name:** MAHASHAKTI FOUNDATION INC.

**Current Principal Place of Business:**

2500 FIORE WAY UNIT 102  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

2500 FIORE WAY UNIT 102  
DELRAY BEACH, FL 33445 US

**FEI Number:** 27-2753112

**Certificate of Status Desired:** No

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

BROOKBANK, KELLY D  
2500 FIORE WAY UNIT 102  
DELRAY BEACH, FL 33445 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 P  
Name BROOKBANK, KELLY D  
Address 2500 FIORE WAY UNIT 102  
City-State-Zip: DELRAY BEACH FL 33445

Title SEC  
Name SIMONS, RACHEL  
Address 2500 FIORE WAY UNIT 102  
City-State-Zip: DELRAY BEACH FL 33445

Title VP  
Name PUMPER, LISA  
Address 2500 FIORE WAY UNIT 102  
City-State-Zip: DELRAY BEACH FL 33445

*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:** KELLY BROOKBANK

**PRESIDENT**

**03/11/2021**

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

\_\_\_\_\_  
Date