

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000010080

Entity Name: GEOED FOUNDATION INC.**Current Principal Place of Business:**563 PECK AVENUE
FORT MYERS, FL 33919**Current Mailing Address:**563 PECK AVENUE
FORT MYERS, FL 33919**FEI Number: 81-4139587****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NANDUR, SRINIVASKUMAR U
563 PECK AVENUE
FORT MYERS, FL 33919 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	D
Name	NANDUR, SRINIVASKUMAR U
Address	563 PECK AVENUE
City-State-Zip:	FORT MYERS FL 33919

Title	D
Name	CHANDRASEKARAN, GAYATHRI
Address	5457 KARLSBURG PLACE
City-State-Zip:	PALM HARBOR FL 34685

Title	D
Name	MENON, KARAN
Address	24 ROLLING BROOK DR
City-State-Zip:	EDISON NJ 08820

Title	D
Name	REKULAPELLI, AKHIL
Address	23211 HEMMINGFORD CIRCLE
City-State-Zip:	DULLES VA 20166

Title	DIRECTOR
Name	KAPAGANTY, SRINIVAS
Address	3920 RIVERGLEN CIRCLE
City-State-Zip:	SUWANEE GA 30024

Title	DIRECTOR
Name	NARAYANAN, VIJAYKRISHNAN
Address	1284 NORTHAMPTON ST
City-State-Zip:	STATE COLLEGE PA 16803

Title	DIRECTOR
Name	YARLAGADDA, SHRIYA SAI
Address	622 CHARING CROSS DRIVE
City-State-Zip:	GRAND BLANC MI 48439

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: SRINIVASKUMAR U. NANDUR**DIRECTOR****03/24/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date