above, or on an attachment with all other like empowered. SIGNATURE: DR. BHASKHARAN JADONATH SECRETARY

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N20000003398 Entity Name: SHRI LAKSHMI NARAYAN MANDIR, INC

Current Principal Place of Business:

269 SOUTH KLONDIKE AVENUE ORLANDO, FL 32811

Current Mailing Address:

269 SOUTH KLONDIKE AVENUE ORLANDO, FL 32811

FEI Number: 85-1281670

Name and Address of Current Registered Agent:

DR. BHASKHARAN JADONATH 1247 GOLDEN LANE ORLANDO, FL 32804 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

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Officer/Director Detail :

	Title	PRE	Title	VPRE
	Name	JADONATH, PANDIT	Name	SHOBRAJ, HARRY
	Address	269 SOUTH KLONDIKE AVENUE	Address	269 SOUTH KLONDIKE AVENUE
	City-State-Zip:	ORLANDO FL 32811	City-State-Zip:	ORLANDO FL 32811
	Title	VPRE	Title	SEC
	Name	LUTCHMAN, VISHNU	Name	JADONATH, BHASKHARAN
4	Address	269 SOUTH KLONDIKE AVENUE	Address	269 SOUTH KLONDIKE AVENUE
,	City-State-Zip:	ORLANDO FL 32811	City-State-Zip:	ORLANDO FL 32811
	Title	TRE	Title	AS T
	Name	JADONATH, YADONATH	Name	RAMBARRAN, SANDRA
	Address	269 SOUTH KLONDIKE AVENUE	Address	269 SOUTH KLONDIKE AVENUE
	City-State-Zip:	ORLANDO FL 32811	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

08/14/2023

FILED Aug 14, 2023 Secretary of State 6106325830CC

Date

Certificate of Status Desired: Yes

Date