#### <u>REPORT</u> DOCUMENT# N34929

2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

Entity Name: THE HINDU SOCIETY OF NORTHEAST FLORIDA, INC.

### **Current Principal Place of Business:**

4968 GREENLAND RD JACKSONVILLE, FL 32258

## **Current Mailing Address:**

4968 GREENLAND RD JACKSONVILLE, FL 32258 US

# FEI Number: 59-3038519

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

JAIN, ANURAG MR. 4968 GREENLAND RD JACKSONVILLE, FL 32258 US Certificate of Status Desired: No

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                 | : ANURAG JAIN                            |                 |                          | 02/29/2024 |  |
|---------------------------|--|-----------------|--------------------------|------------|--|
|                           | Electronic Signature of Registered Agent |                 |                          | Date       |  |
| Officer/Director Detail : |  |                 |                          |            |  |
| Title                     | VICECHAIR                                | Title           | SECRETARY                |            |  |
| Name                      | AYYAGARI, SAILAJA MRS.                   | Name            | KAPADIA, JIGNESH MR.     |            |  |
| Address                   | 12200 ANGLETERRE DR                      | Address         | 5318 WINROSEFALLS DR     |            |  |
| City-State-Zip:           | JACKSONVILLE FL 32258                    | City-State-Zip: | JACKSONVILLE FL 32258    |            |  |
| Title                     | TREASURER                                | Title           | CHAIRMAN                 |            |  |
| Name                      | JAIN, ANURAG MR.                         | Name            | GARG, ANJU MRS.          |            |  |
| Address                   | 12182 HAZELMOOR CT                       | Address         | 7857 BLACKSTONE RIVER DR |            |  |
| City-State-Zip:           | JACKSONVILLE FL 32258                    | City-State-Zip: | JACKSONVILLE FL 32256    |            |  |

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: ANURAG JAIN | MR | 02/29/2024 |
|------------------------|----|------------|
|------------------------|----|------------|

Electronic Signature of Signing Officer/Director Detail

Date