# DOCUMENT# N93000004399

Entity Name: THAKKAR FAMILY FOUNDATION, INC.

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

C/O FISHERBROYLES, LLP 4830 W. KENNEDY BLVD. STE. 600 TAMPA, FL 33609

## **Current Mailing Address:**

C/O FISHERBROYLES, LLP 4830 W. KENNEDY BLVD. STE. 600 TAMPA, FL 33609 US

## FEI Number: 59-3204990

# Name and Address of Current Registered Agent:

BACHMAN, RADHA 4308 W WOODMERE RD. TAMPA, FL 33609 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

## **Officer/Director Detail :**

Title	PD	Title	SD
Name	THAKKAR, VINOD CMD	Name	THAKKAR, TARLIKA MD
Address	4105 LAFAYETTE AVE	Address	4105 LAFAYETTE AVE
City-State-Zip:	SEBRING FL 33875	City-State-Zip:	SEBRING FL 33875
Title	VD	Title	VD
Title Name	VD THAKKAR, VIPUL	Title Name	VD BACHMAN, RADHA V

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: VINOD THAKKAR

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date