

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

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

**Certificate of Status Desired:** No

**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

Date

**Officer/Director Detail :**

Title PD  
Name THAKKAR, VINOD CMD  
Address 4105 LAFAYETTE AVE  
City-State-Zip: SEBRING FL 33875

Title SD  
Name THAKKAR, TARLIKA MD  
Address 4105 LAFAYETTE AVE  
City-State-Zip: SEBRING FL 33875

Title VD  
Name THAKKAR, VIPUL  
Address 11718 SMART LANE  
City-State-Zip: CHARLOTTE NC 28277

Title VD  
Name BACHMAN, RADHA V  
Address 4308 W WOODMERE RD.  
City-State-Zip: TAMPA FL 33609

*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

**OWNER**

**01/11/2024**

Electronic Signature of Signing Officer/Director Detail

Date