

FILE NOW: FILING FEE IS \$61.25

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Feb 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **763000** (7)

1. Corporation Name

BENGALI SOCIETY OF FLORIDA, INC.



Principal Place of Business	Mailing Address
1216 LA BRAD LANE TAMPA FL 33613 US 19 Emerald Ct. Satellite Beach FL- 32937	1216 LA BRAD LANE TAMPA FL 33613 US 19 Emerald Ct. Satellite Beach FL- 32937

3. Date Incorporated or Qualified	04/27/1982
4. FEI Number	59-2345688
Applied For	☐
Not Applicable	☒

2. Principal Place of Business	2a. Mailing Address
21 19 Emerald Court Suite, Apt. #, etc. _____ 22 City & State 23 Satellite Beach, FL Zip 24 32937	26 19 Emerald Court Suite, Apt. #, etc. _____ 27 City & State 28 Satellite Beach, FL Zip 29 32937
Country	Country
25 USA	30 USA

5. Certificate of Status Desired	☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	☐ Yes ☒ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	☐ Yes ☒ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MUKHERJEA, ARUNAVA 1216 LA BRAD LANE TAMPA FL 33613 Bidyut chakravorty	81 Name BIDYUT CHAKRAVORTY 82 Street Address (P.O. Box Number is Not Acceptable) 19 EMERALD COURT 83 84 City SATELLITE BEACH FL 85 Zip Code 32937

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Bidyut Chakravorty* **BIDYUT K. CHAKRAVORTY** **02/15/98**
 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☒ DELETE	1.1 TITLE	President/Director P/D ☒ Change ☐ Addition
NAME	MUKHERJEA, ARUNAVA	1.2 NAME	BIDYUT CHAKRAVORTY
STREET ADDRESS	1216 LA BRAD LANE	1.3 STREET ADDRESS	19 EMERALD COURT
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	SATELLITE BEACH, FL- 32937
TITLE	V ☒ DELETE	2.1 TITLE	V/D ☒ Change ☒ Addition
NAME	SARKAR, SUDEEP	2.2 NAME	MILAN MUKERJI
STREET ADDRESS	13201 NATIONAL DRIVE, APT #C	2.3 STREET ADDRESS	17815 Green Willow Dr.
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	Tampa, FL- 33647
TITLE	T ☒ DELETE	3.1 TITLE	T/D ☒ Change ☐ Addition
NAME	PATI, TRISHNA	3.2 NAME	RATAN K. GUHA
STREET ADDRESS	14742 BURNTWOOD CIRCLE	3.3 STREET ADDRESS	2901 LOLISSA LANE
CITY-ST-ZIP	ORLANDO FL 32826	3.4 CITY-ST-ZIP	MAITLAND, FL- 32751
TITLE	D ☒ DELETE	4.1 TITLE	T/D ☒ Change ☐ Addition
NAME	GANGULY, ARUNABHA	4.2 NAME	SUPRATIK DEY
STREET ADDRESS	7871 NIAGARA AVENUE	4.3 STREET ADDRESS	2808 CRANE TRACE CIRCLE
CITY-ST-ZIP	TEMPLE TERRACE FL	4.4 CITY-ST-ZIP	ORLANDO, FL- 32837
TITLE	D ☒ DELETE	5.1 TITLE	S/D ☒ Change ☐ Addition
NAME	MUKHERJEE, ANJU	5.2 NAME	SIDDHARTHA SARBADHIKARY
STREET ADDRESS	7940 NASHUA LANE	5.3 STREET ADDRESS	72, GLADES CIRCLE
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP	LARGO, FL- 33771
TITLE	D ☒ DELETE	6.1 TITLE	S/D ☒ Change ☐ Addition
NAME	DAS, RENU	6.2 NAME	SIDDARTHA SEN
STREET ADDRESS	1920 DAS COURT	6.3 STREET ADDRESS	6373 CONROY RD # 1905
CITY-ST-ZIP	KISSIMMEE FL	6.4 CITY-ST-ZIP	ORLANDO, FL- 32835

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on any attachment with an address.

SIGNATURE: *Bidyut Chakravorty* **BIDYUT K. CHAKRAVORTY** **02/15/98**
 407-777-4298

CR2E037 (10/97)