## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 770343** 

FILED Jan 05, 2009 Secretary of State

Entity Name: INDIAN RELIGIOUS AND CULTURAL CENTER OF FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

7797 NORTH UNIVERSITY DR. 104 NW 100TH AVE.

SUITE 205 PLANTATION, FL 33324

TAMARAC, FL 33321

P O BOX 190613

LAUDERHILL, FL 33319 US

**Current Mailing Address:** 

FEI Number: 59-2239186 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MRS. DAKSHA, VKHARIA THAKER, DURGESH DR. 3365, BRIDLE PATH LANE 11048 NW 19TH ST

CORAL SPRING, FL 33071 US WESTON, FL 33331

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: DURGESH THAKER 01/05/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

**New Mailing Address:** 

(X) Change ( ) Addition () Delete KHAKHRIA, MILAN DR. Name:

WADHWA, POONAM Name: 264 NW 102 TERR Address: 104 NW 100TH AVE Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: PLANTATION, FL 33324

Title: ( ) Delete Title: (X) Change ( ) Addition

Name: GUPTA, SANJAY Name: DUSARA, NISHUTA DR. Address: 13792 N. GARDEN COVE CIR. Address: 334 NW 69TH AVE # 295 City-St-Zip: **DAVIE, FL 33325** City-St-Zip: PLANTATION, FL 33317

Title: () Delete Title: (X) Change ( ) Addition

KHAKHRIA, MILAN DEO, REMA N Name: Name: 104 NW 100TH AVE 4836 CHARDONNAY DRIVE Address: Address:

City-St-Zip: PLANTATION, FL 33324 City-St-Zip: CORAL SPRING, FL 33067

Title: () Delete Title: (X) Change ( ) Addition

Name: THAKER, DURGESH Name: THAKER, DURGESH Address: 11048 NW 19TH ST Address: 11048 NW 19TH ST CORAL SPRING, FL 33071 57

City-St-Zip: City-St-Zip: CORAL SPRING, FL 33071

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MILAN KHAKHRIA Ρ 01/05/2009