

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002544

FILED  
Mar 07, 2006  
Secretary of State

**Entity Name:** INTERNATIONAL SWAMINARAYAN SATSANG ORGANISATION CORPORATION

**Current Principal Place of Business:**

4, LOUISA PLACE  
WEEMAWKEN, NJ 07087

**New Principal Place of Business:**

**Current Mailing Address:**

724 N. WABASH AVE  
LAKELAND, FL 33815

**New Mailing Address:**

**FEI Number:** 22-2290410

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PATEL, MANIBHAI D  
724 N. WABASH AVE.  
LAKELAND, FL 33815 US

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

PATEL, MANIBHAI D  
2793 NEW TAMPA HWY  
LAKELAND, FL 33815 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: MANILAL PATEL

03/07/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PATEL, MANIBHAI D  
Address: 724 N WABASH AVE  
City-St-Zip: LAKELAND, FL 33815

Title: V (X) Delete  
Name: SHAH, RASIKLAL H  
Address: 5106 19TH LANE EAST  
City-St-Zip: BRADENTON, FL 34203

Title: S ( ) Delete  
Name: PATEL, NALIN  
Address: 3914 DERBY DRIVE  
City-St-Zip: LAKELAND, FL 33809

Title: T ( ) Delete  
Name: PATEL, BALDEV  
Address: 5029 ENGLWOOD LANE  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: C ( ) Delete  
Name: PANDE, TEJENDRA P  
Address: SHREE SWAMINARAYAN BAG MEMNAGAR  
City-St-Zip: AHMEDABAD (INDIA) 38052,

Title: VC ( ) Delete  
Name: PATEL, CHANDRESH  
Address: 403 ANDOVER ST  
City-St-Zip: LOWELL, MA 01852

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANILAL PATEL

P

03/07/2006

Electronic Signature of Signing Officer or Director

Date