

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2008 08:00 A
Secretary of State

DOCUMENT # F06000004875

1. Entity Name
LOK FOUNDATION, INC.



Principal Place of Business
500 EAST BROWARD BLVD
SUITE 2100
FORT LAUDERDALE, FL 33394

Mailing Address
% SONEET KAPILA KAPILA & CO.
1000 S FEDERAL HIGHWAY #200
FT LAUDERDALE, FL 33316



02072008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0821408

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	LALL, RAJIV B DR.
STREET ADDRESS	6600 BROXBURN DRIVE
CITY-ST-ZIP	BETHESDA, MD 20817
TITLE	D
NAME	MCGOWAN, GREGORY
STREET ADDRESS	500 EAST BROWARD BLVD, SUITE 2100
CITY-ST-ZIP	FORT LAUDERDALE, FL 33394
TITLE	TD
NAME	PECK, DONALD
STREET ADDRESS	11, GOLF LINKS
CITY-ST-ZIP	NEW DELHI-110003,
TITLE	PD
NAME	ADVANI, VIJAY
STREET ADDRESS	484 WALSH ROAD
CITY-ST-ZIP	ATHERTON, CA 94027
TITLE	S
NAME	CHAND, BUNTY
STREET ADDRESS	6600 BROXBURN DRIVE
CITY-ST-ZIP	BETHESDA, MD 20817
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000825251
02/21/08-80001-024 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gregory E. McGowan

2/11/08 954-527-7416

Date

Daytime Phone #