

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004875

FILED  
Jan 29, 2009  
Secretary of State

Entity Name: LOK FOUNDATION, INC.

## Current Principal Place of Business:

500 EAST BROWARD BLVD  
SUITE 2100  
FORT LAUDERDALE, FL 33394

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

FEI Number: 01-0821408

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: LALL, RAJIV B DR.  
Address: 6600 BROXBURN DRIVE  
City-St-Zip: BETHESDA, MD 20817

Title: D ( ) Delete  
Name: MCGOWAN, GREGORY  
Address: 500 EAST BROWARD BLVD, SUITE 2100  
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: TD ( ) Delete  
Name: PECK, DONALD  
Address: 11, GOLF LINKS  
City-St-Zip: NEW DELHI-110003, OC

Title: PD ( ) Delete  
Name: ADVANI, VIJAY  
Address: 484 WALSH ROAD  
City-St-Zip: ATHERTON, CA 94027

Title: S ( ) Delete  
Name: CHAND, BUNTY  
Address: 6600 BROXBURN DRIVE  
City-St-Zip: BETHESDA, MD 20817

## 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:

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: GREGORY MCGOWAN

D

01/29/2009

Electronic Signature of Signing Officer or Director

Date