

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2009
Secretary of State

DOCUMENT# F06000006711

Entity Name: HINDU SWAYAMSEVAK SANGH-U.S.A., INC.

Current Principal Place of Business:

121 HAWTHORNE CT
ROCKAWAY, NJ 078662252

New Principal Place of Business:

Current Mailing Address:

121 HAWTHORNE CT
ROCKAWAY, NJ 078662252

New Mailing Address:

FEI Number: 52-1647017 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BALSARE, YASHWANT
5202 ABBEY PARK AV
TAMPA, FL 33647 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: BHATT, JANARDHAN
Address: 347 CARMITA AV
City-St-Zip: RUTHERFORD, NJ 07070

Title: D () Delete
Name: MIRAJKAR, YELLOJI K
Address: 161 HANCOCK RD
City-St-Zip: PISCATAWAY, NJ 08854

Title: D () Delete
Name: SHAH, DINESH
Address: 8731 ROCKY VALLEY DR
City-St-Zip: HOUSTON, TX 77083

Title: P () Delete
Name: NANDA, VED
Address: 1795 GLENCOE ST
City-St-Zip: DENVER, CO 80220

Title: S () Delete
Name: KANKANI, ARUN
Address: 6114 COLUMBIA FALLS LANE
City-St-Zip: KATY, TX 77450

Title: T () Delete
Name: GUPTA, YOGINDER
Address: 121 HAWTHORNE CT
City-St-Zip: ROCKAWAY, NJ 078662252

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 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: YOGINDER GUPTA

TREA

05/02/2009

Electronic Signature of Signing Officer or Director

_____ Date