

2008 FOR PROFIT CORPORATION ANNUAL REPORT

Attachment 1 of 2

DOCUMENT #F07000005427

1. Entity Name
PATNI COMPUTER SYSTEMS LIMITED CORP.



FILED

08 SEP 22 PM 4:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
ONE BROADWAY
CAMBRIDGE, MA 02142

Mailing Address
ONE BROADWAY
CAMBRIDGE, MA 02142

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08262008 Chg-P CR2E034 (12/06)

4. FEI Number
52-1529130

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

200136270942
09/23/08--01049--010 **550.00

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PATNI, NARENDRA K ONE BROADWAY CAMBRIDGE, MA 02142	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KANAKAL, ARUN ONE BROADWAY CAMBRIDGE, MA 02142	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCFO SINGH, SURJEET ONE BROADWAY CAMBRIDGE, MA 02142	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PURI, ANUPAM P AKRUTI, MIDC CROSS RD., NO 21 ANDIHERI (E), MUMBAI -400 093, FF IND	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VENKATESWARAN, RAMESH AKRUTI, MIDC CROSS RD., NO 21 ANDIHERI (E), MUMBAI -400 093, FF IND	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUSUMANO, MICHAEL A AKRUTI, MIDC CROSS RD., NO 21 ANDIHERI (E), MUMBAI -400 093, FF IND	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATNI, GAJENDRA K AKRUTI, MIDC CROSS RD., NO 21 ANDIHERI (E), MUMBAI -400 093, FF IND	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATNI, ASHOK K AKRUTI, MIDC CROSS RD., NO 21 ANDIHERI (E), MUMBAI -400 093, FF IND	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHAH, PRADIP AKRUTI, MIDC CROSS RD., NO 21 ANDIHERI (E), MUMBAI -400 093, FF IND	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 607, 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: Narendra K Patni NARENDRA PATNI 9-3-2008 617-914-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**2008 FOR PROFIT CORPORATION ANNUAL REPORT
PATNI COMPUTER SYSTEMS LIMITED
CONTINUATION SHEET FOR OFFICERS AND DIRECTORS**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11, CONTINUED

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRABE, WILLIAM G AKRUTI, MIDC CROSS RD., NO 21 ANDIHERI (E), MUMBAI -400 093, FF IND	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VAN DEN BOOG, LOUIS T AKRUTI, MIDC CROSS RD., NO 21 ANDIHERI (E), MUMBAI -400 093, FF IND	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUGGAL, ARUN AKRUTI, MIDC CROSS RD., NO 21 ANDIHERI (E), MUMBAI -400 093, FF IND	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition