

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000761

Entity Name: BHAKTI YOGA SOCIETY, INC.

FILED
Apr 16, 2008
Secretary of State

Current Principal Place of Business:

2006 NW 55TH AVE
APT J2
GAINESVILLE, FL 32653

New Principal Place of Business:

13716 NW 138TH TER
ALACHUA, FL 32615

Current Mailing Address:

2006 NW 55TH AVE
APT J2
GAINESVILLE, FL 32653

New Mailing Address:

13716 NW 138TH TER
ALACHUA, FL 32615

FEI Number: 11-3282299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOWLEY, JOHN
2006 NW 55TH AVE
APT J2
GAINESVILLE, FL 32653 US

Name and Address of New Registered Agent:

HOWLEY, JOHN
13716 NW 138TH TER
ALACHUA, FL 32615 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: JOHN HOWLEY

04/16/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOWLEY, JOHN
Address: 2006 NW 55TH AVE APT J2
City-St-Zip: GAINESVILLE, FL 32653

Title: SD () Delete
Name: ELLIS, ANTHONY
Address: 18925 NW CR 239
City-St-Zip: ALACHUA, FL 32616

Title: TD () Delete
Name: MERCED, NOEL D
Address: 114 23 LEFFERTS BLVD
City-St-Zip: NEW YORK, NY 11420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOWLEY, JOHN
Address: 13716 NW 138TH TER
City-St-Zip: ALACHUA, FL 32615

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: JOHN HOWLEY

PD

04/16/2008

Electronic Signature of Signing Officer or Director

Date