

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029851

FILED
Jan 23, 2004
Secretary of State

Entity Name: SHANTI NIVAS, LLC

Current Principal Place of Business:

3901 66TH STREET, NORTH
SUITE 201
ST. PETERSBURG, FL 33709

New Principal Place of Business:

Current Mailing Address:

3901 66TH STREET, NORTH
SUITE 201
ST. PETERSBURG, FL 33709

New Mailing Address:

FEI Number: 65-1200703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOX, GREGORY A
28050 U.S. HIGHWAY 19, NORTH
SUITE 100
CLEARWATER, FL 33761 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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: SREENATH, BELUR S
Address: 3901 66TH STREET, NORTH, SUITE 201
City-St-Zip: ST. PETERSBURG, FL 33709

Title: MGR () Delete
Name: JACOB, POTHEEN
Address: 3901 66TH STREET, NORTH, SUITE 201
City-St-Zip: ST. PETERSBURG, FL 33709

Title: MGR () Delete
Name: DESAI, CHETAN
Address: 3901 66TH STREET, NORTH, SUITE 201
City-St-Zip: ST. PETERSBURG, FL 33709

ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BELUR S SREENATH, MD

MGR

01/23/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date