

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002524

FILED  
Feb 24, 2006  
Secretary of State

**Entity Name:** INDIA ASSOCIATION CULTURAL AND EDUCATION CENTER OF NORTH CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

2091 SW 55TH STREET ROAD  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

2091 SW 55TH STREET ROAD  
OCALA, FL 34474

**New Mailing Address:**

**FEI Number:** 59-3640862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KARVE, NANDKUMAR R  
2091 SW 55TH STREET ROAD  
OCALA, FL 34474 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: P ( ) Delete  
Name: GAEKWAD, DIGVIJAY  
Address: 2100 SE 73RD LOOP  
City-St-Zip: OCALA, FL 34480

Title: VP ( ) Delete  
Name: PANCHAL, JAY  
Address: 6979 SE 12TH CIR  
City-St-Zip: OCALA, FL 34480

Title: S ( ) Delete  
Name: CHANDRA, TINA  
Address: 1980 SW 40TH PLACE  
City-St-Zip: OCALA, FL 34474

Title: T ( ) Delete  
Name: PATEL, ANIL  
Address: 1726 SW 27TH ST  
City-St-Zip: OCALA, FL 34474

Title: D (X) Delete  
Name: RUMALLA, PRABHAKAR  
Address: 1330 SE 73RD PLACE  
City-St-Zip: OCALA, FL 34480

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ANJU, VASUDEVAN DR  
Address: 3510 SW 24TH AVE RD  
City-St-Zip: OCALA, FL 34474

Title: VP (X) Change ( ) Addition  
Name: JAGALUR, THUMATI DR  
Address: 156 SE 69TH PL  
City-St-Zip: OCALA, FL 34480

Title: S (X) Change ( ) Addition  
Name: CHANDRA, TINA DR  
Address: 1980 SW 40TH PLACE  
City-St-Zip: OCALA, FL 34474

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 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: A PATEL

T

02/24/2006

Electronic Signature of Signing Officer or Director

Date