

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002524

FILED
Jan 16, 2009
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:

2030 NE 36TH AVENUE
OCALA, FL 34470

Current Mailing Address:

2091 SW 55TH STREET ROAD
OCALA, FL 34474

New Mailing Address:

2030 NE 36TH AVENUE
OCALA, FL 34470

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: DOSHI, CHANDRAKANT
Address: 8100 SW 54TH CT
City-St-Zip: OCALA, FL 34476

Title: VP () Delete
Name: PATEL, ANGANA
Address: 401 SE 36TH LANE
City-St-Zip: OCALA, FL 34471

Title: S () Delete
Name: CACODCAR, PRAVINA
Address: 5574 SW 30TH AVENUE
City-St-Zip: OCALA, FL 34474

Title: T () Delete
Name: PATIDAR, SAMUEL
Address: 6222 SW 80TH LANE
City-St-Zip: OCALA, FL 34476

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SAMUEL S. PATIDAR

T

01/16/2009

Electronic Signature of Signing Officer or Director

Date