

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000002524

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

2030 NE 36TH AVENUE  
OCALA, FL 34470

**New Principal Place of Business:**

**Current Mailing Address:**

2030 NE 36TH AVENUE  
OCALA, FL 34470

**New Mailing Address:**

1726 SW 27TH ST  
OCALA, FL 34471

**FEI Number:** 59-3640862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CACODCAR, PRAVINA  
2030 NE 36TH AVENUE  
OCALA, FL 34470 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  
Name: VASUDEVAN, ANJU DR  
Address: 3510 SW 24TH AVE RD  
City-St-Zip: Ocala, FL 34474

Title: VP  
Name: PATIDAR, SURESH  
Address: 6222 SW 80TH LANE  
City-St-Zip: Ocala, FL 34476

Title: S  
Name: CACODCAR, PRAVINA  
Address: 5574 SW 30TH AVENUE  
City-St-Zip: Ocala, FL 34471

Title: T  
Name: MEHTA, KALPESH  
Address: 2312 SE 18TH CIR  
City-St-Zip: Ocala, FL 34471

I hereby 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 all other like empowered.

SIGNATURE: KALPESH MEHTA

T

04/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date