2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005
Secretary of State

DOCUMENT# N00000005430

Entity Name: SHREE KRISHNA MEDICAL AND PROFESSIONAL PLAZA ASSOCIATION, INC.

Current Principal Place of Business:

2175-A CHENEY HWY
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

2175-A CHENEY HWY
TITUSVILLE, FL 32780

New Mailing Address:

FEI Number: 59-3700019 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATEL, VADILAL S
1276 LITTLE OAK CIRCLE
TITUSVILLE, FL 32780 US

Name and Address of New Registered Agent:

PATEL, VADILAL S
2175 A CHENEY HIGHWAY
TITUSVILLE, FL 32780 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: VADILAL S PATEL 04/08/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PATEL, VADILAL S
Address: 1276 LITTLE OAK CIRCLE
City-St-Zip: TITUSVILLE, FL 32780

Title: D ( ) Delete
Name: DELVADIA, VIJYA R
Address: 4900 CATHEDRAL WAY
City-St-Zip: TITUSVILLE, FL 32780

Title: D ( ) Delete
Name: PATEL, JAYESH V
Address: 1901 JESS PARRISH COURT
City-St-Zip: TITUSVILLE, FL 32796

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PATEL, VADILAL S
Address: 2175 A CHENEY HIGHWAY
City-St-Zip: TITUSVILLE, FL 32780

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 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: VADILAL S PATEL D 04/08/2005
Electronic Signature of Signing Officer or Director Date