

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000005810

**FILED**  
**Oct 26, 2009**  
**Secretary of State**

**Entity Name:** SHIVA SHAKTI MANDIR HINDU ORGANIZATION OF ORLANDO, INC.

**Current Principal Place of Business:**

129 N PINE HILLS RD  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

7313 EDNITAS WAY  
ORLANDO, FL 32818

**New Mailing Address:**

PO BOX 680058  
ORLANDO, FL 23868

**FEI Number:** 59-3670034      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

RAGHAVENDRA, ALEVOOR PD  
129 N PINE HILLS RD  
ORLANDO, FL 32811 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: ALEVOOR RAGHAVENDRA

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ALEVOOR, RAGHAVENDRA  
Address: 7313 EDNITAS WAY  
City-St-Zip: ORLANDO, FL 32818

Title: STD ( ) Delete  
Name: SRIKANTA, ACHARYA  
Address: 7313 EDNITAS WAY  
City-St-Zip: ORLANDO, FL 32818

Title: D ( ) Delete  
Name: ALEVOOR, LENA  
Address: 7313 EDNITAS WAY  
City-St-Zip: ORLANDO, FL 32818

Title: D ( ) Delete  
Name: ROSHNI, ACHARYA  
Address: 7313 EDNITAS WAY  
City-St-Zip: ORLANDO, FL 32818

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: NANDA KUMAR, RAJENDRA  
Address: 129 N PINE HILLS RD  
City-St-Zip: ORLANDO, FL 32811

Title: D (X) Change ( ) Addition  
Name: ALEVOOR, RESHMA  
Address: 129 N PINE HILLS RD  
City-St-Zip: ORLANDO, FL 32811

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: ALEVOOR RAGHAVENDRA

PD

10/26/2009

Electronic Signature of Signing Officer or Director

Date