## **2002 UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # N0100007432

1. Entity Name

## KAMLA DEVI TAUNK FOUNDATION, INC

Principal Place of Business Mailing Address

## **FILED** Jul 22, 2002 8:00 am Secretary of State

05-28-2002 91736 045 \*\*\*\*61.25

4050 PRESIDENTIAL DRIVE PALM HARBOR FL 34685			4050 PRESIDENTIAL DRIVE PALM HARBOR FL 34685								903		
2. Principal	Place of Busine	ss	3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.						DO NOT WE				
City & Sta	ite	City & State					4. FEI Number Applied For						
								59-375 2075				Not Applicable	
Zip Country			Zip		Country			5. Certificate of Status Desired			\$8.75 Ad Fee Require	\$8.75 Additional Fee Required	
	6. Name a	ind Address of Curren	t Registered	Agent				7. Name and Add	iress of New	Registered	Agent		1
						Name							7
CHIRADDI	uri, Roshan					Street Address (P.O. Box Number is Not Acceptable)							
	S. 19 NORTH		<u> </u>										
SUITE 29												╛	
PALM HA	RBOR FL 346				City				Fl	Zip Cod	le		
8. The above the obligation SIGNATURE	tions of register	submits this statement fred agent.	or the purpo	se of changing its i	register	ed office or re	egistere	ed agent, or both, in	the State of F	lorida. I am	familiar with,	and accept	
3.	Signature, typed or	printed name of registered agen	t and title if applic	cable. (NOTE:	Registere	d Agent signature	required v	when reinstating)		DATE			
**	After Septer	·	9. Election Campaign F Trust Fund Contribut				\$5.00 May Be Added to Fees			k Payable ent of State			
10.		OFFICERS AND D	RECTORS		11.		A	DDITIONS/CHANG	ES TO OFFICI	ERS AND D	IRECTORS IN	10	1
TITLE	PD Delete			☐ Delete	TITLE						Change	Addition	18
NAME	TAUNK, JAV				NAM								3
STREET ADDRESS 4050 PRESIDENTIAL DRIVE PALM HARBOR FL 34685						ET ADDRESS -ST-ZIP							18
TITLE	VD	ON FL 34003		☐ Delete	TITLE				<u> </u>		☐ Change	Addition	- 6
NAME	TAUNK, VIJA	AY L		L Delete	NAMI	- 1					□ Change	☐ Addition	١
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CITY-ST-ZIP		OR FL 34685			CITY-	ST-ZIP		<u> </u>			<del>THE STATE OF</del>		
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NAME					NAME								
STREET ADDRESS  CITY-ST-ZIP						T ADDRESS ST-2IP							
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

7/3/02 (727)78(-0017

5/28/2002-91736-045-\$61.25-\$61.25

2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N0100007432-1. Entity Name KAMLA DEVI TAUNK FOUNDATION, INC. Principal Place of Business Mailing Address 39035 4050 PRESIDENTIAL DRIVE 4050 PRESIDENTIAL DRIVE PALM HARBOR FL 34685 PALM HARBOR FL 34685 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable - Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required: 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHIKARPURI, ROSHAN L Street Address (P.O. Box Number is Not Acceptable) 33920 U.S. 19 NORTH SUITE 290 PALM HARBOR FL 34684 Zip Code 8. 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 3 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Change Addition (9/01 NAME TAUNK, JAWAHAR L NAME STREET ADDRESS 4050 PRESIDENTIAL DRIVE STREET ADDRESS CITY-ST-ZIP PALM HARBOR FL 34685 CITY-31-71P W TITLE Oelete TITLE Change ☐ Addition TAUNK, VIJAY L NAME NAME 4050 PRESIDENTIAL DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM HARBOR FL 34685 CTTY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition TAUNK::PUSHPAK->-> NAME STREET ADDRESSS 4050 PRESIDENTIAL DRIVE STREET ADDRESS CITY-ST-ZIP PALM HARBOR FL 34685 CITY-ST-ZIP TITLE D Delete स्ता ह Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY+ST-ZIP TITLE ☐ Defete □ Change Addition NAME MAME STREET ADDRESS STREET ACCRESS CUTY-ST-ZIP CITY-ST-ZIP TITLE Oelete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIG