

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001170

FILED
Feb 26, 2007
Secretary of State

Entity Name: SHRI TULSI VEDANTA SOCIETY, INC.

Current Principal Place of Business:

4160 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

4160 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMSUMAIR, VASHTI
4160 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065 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: PD () Delete
Name: RAMSUMAIR, VASHTI
Address: 4160 CORAL SPRINGS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SD () Delete
Name: ROOPCHAN, NARINE
Address: 40 NW 3RD TERRACE
City-St-Zip: CORAL SPRINGS, FL 33064

Title: TD () Delete
Name: MAHARAJ, DIPNARINE
Address: 6641 GARFIELD STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: D () Delete
Name: RAMSUMAIR, VISHNU
Address: 4150 CORAL SPRINGS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: ROOPCHAN, POORAN
Address: 40 NW 3RD TERRACE
City-St-Zip: CORAL SPRINGS, FL 33064

Title: D () Delete
Name: SUMAIR, ADITH RAM
Address: 4150 CORAL SPRINGS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: VASHTI RAMSUMAIR

MS

02/26/2007

Electronic Signature of Signing Officer or Director

Date