

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001170

FILED
Jun 14, 2011
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
Name: RAMSUMAIR, VASHTI
Address: 4160 CORAL SPRINGS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

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

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

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

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

Title: D
Name: RAMSUMAIR, ADITH
Address: 4150 CORAL SPRINGS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

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: VASHTI RAMSUMAIR

MS

06/14/2011

Electronic Signature of Signing Officer or Director

Date