

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007659

FILED  
Apr 29, 2007  
Secretary of State

Entity Name: RADHA DAMODAR TSKP, INC.

## Current Principal Place of Business:

18127 NW 112 BLVD  
ALACHUA, FL 32615

## New Principal Place of Business:

## Current Mailing Address:

18127 NW 112 BLVD  
ALACHUA, FL 32615

## New Mailing Address:

FEI Number: 33-1024792

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOY, JEFFREY T TD  
20415 NW 113TH WAY  
ALACHUA, FL 32615 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: DOUGLAS, GLICK H  
Address: 18127 NW 112 BLVD  
City-St-Zip: ALACHUA, FL 32615

Title: SD ( ) Delete  
Name: HOWLEY, JOHN  
Address: 2006 NW 55 AVE, APT J-2  
City-St-Zip: GAINESVILLE, FL 32653

Title: TD ( ) Delete  
Name: MOY, JEFFREY T  
Address: 20415 NW 113TH WAY  
City-St-Zip: ALACHUA, FL 32615

## 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:

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: DOUGLAS GLICK

PD

04/29/2007

Electronic Signature of Signing Officer or Director

Date