

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008152

FILED
Apr 21, 2009
Secretary of State

Entity Name: HINDU TEMPLE OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

563 PECK AVENUE
FORT MYERS, FL 33919 US

New Principal Place of Business:

12552 PLANTATION ROAD
FORT MYERS, FL 33966 US

Current Mailing Address:

P O BOX 60845
FORT MYERS, FL 33906 US

New Mailing Address:

FEI Number: 05-0536510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NANDUR, MALLIKA
563 PECK AVENUE
FORT MYERS, FL 33919 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: P () Delete
Name: SUNDARESAN, RENG
Address: 8601 NOTTINGHAM POINTE WAY
City-St-Zip: FORT MYERS, FL 33912 US

Title: V () Delete
Name: NANDUR, MALLIKA
Address: 563 PECK AVENUE
City-St-Zip: FORT MYERS, FL 33919 US

Title: T () Delete
Name: BUSHAN, RATHNA
Address: 11341 LONGWATER CHASE CT
City-St-Zip: FORT MYERS, FL 33908 US

Title: S () Delete
Name: RAJENDRA, LATHA
Address: 108SE 12TH AVENUE
City-St-Zip: CAPE CORAL, FL 33990 US

Title: D () Delete
Name: KRISHNAN, LAKSHMI
Address: 10090 MAGNOLIA POINTE
City-St-Zip: FORT MYERS, FL 33919 US

Title: D () Delete
Name: JAIN, USHA
Address: 5836 RIVERSIDE LN.
City-St-Zip: FORT MYERS, FL 33919 US

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: D (X) Change () Addition
Name: PATEL, TARUN
Address: 11435 S. CLEVELAND AVE.
City-St-Zip: FORT MYERS, FL 33907 US

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: MALLIKA NANDUR

V

04/21/2009

Electronic Signature of Signing Officer or Director

Date