2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2008
Secretary of State

DOCUMENT# N04000003461

Entity Name: TELUGU ASSOCIATION OF GREATER ORLANDO INC.

Current Principal Place of Business:

8736 SOUTHERN BREEZE DRIVE
ORLANDO, FL 32836

New Principal Place of Business:

3013 HATTERAS PT
OVIEDO, FL 32765

Current Mailing Address:

8736 SOUTHERN BREEZE DRIVE
ORLANDO, FL 32836

New Mailing Address:

3013 HATTERAS PT
OVIEDO, FL 32765

FEI Number: 55-0870845 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KALAKOTA, JYOTI
8736 SOUTHERN BREEZE DRIVE
ORLANDO, FL 32836 US

Name and Address of New Registered Agent:

KASIREDDY, INDRASENA R
3013 HATTERAS PT
OVIEDO, FL 32765 US

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: KASIREDDY INDRASENA 02/19/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KALAKOTA, JYOTI
Address: 8736 SOUTHERN BREEZE DRIVE
City-St-Zip: ORLANDO, FL 32836

Title: PED ( ) Delete
Name: KASIREDDY, INDRASENA R
Address: 3013 HATTERAS PT
City-St-Zip: OVIEDO, FL 32765

Title: SD ( ) Delete
Name: GUDURI, RAMU
Address: 248 PORCHESTER DR
City-St-Zip: SANFORD, FL 32771

Title: TD ( ) Delete
Name: KOMPELLA, PRASAD
Address: 509 HEATHEROAK CV
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D ( ) Delete
Name: DOMMETI, JHANSI LAKSHMI
Address: 14331 CHEVERLIEGH DR
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: KASIREDDY, INDRASENA R
Address: 3013 HATTERAS PT
City-St-Zip: OVIEDO, FL 32765

Title: PED (X) Change ( ) Addition
Name: GUDURI, RAMU
Address: 248 PORCHESTER DR
City-St-Zip: SANFORD, FL 32771

Title: SD (X) Change ( ) Addition
Name: YERRAPRAGADA, SAI P
Address: 14790 TULLAMORE LOOP
City-St-Zip: WINTER GARDEN, FL 34787

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: SAI P YERRAPRAGADA SD 02/19/2008
Electronic Signature of Signing Officer or Director Date