

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004949

FILED  
Mar 07, 2009  
Secretary of State

**Entity Name:** SHRI SURYA NARAYAN MANDIR OF FLORIDA, INC.

**Current Principal Place of Business:**

8406 CLARCONA OCOEE RD  
ORLANDO, FL 32818 US

**New Principal Place of Business:**

**Current Mailing Address:**

5503 NW 104 PL  
GAINESVILLE, FL 32653

**New Mailing Address:**

**FEI Number:** 20-1144285

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAMNARINE, VISHNU  
5503 NW 104TH PLACE  
GAINESVILLE, FL 32653 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: T ( ) Delete  
Name: BAJRANGI, MAHENDRA  
Address: 14421 TILDEN ROAD  
City-St-Zip: WINTER GARDEN, FL 34787

Title: T ( ) Delete  
Name: RAMNARINE, KAY  
Address: 5503 NW 104TH PLACE  
City-St-Zip: GAINESVILLE, FL 32653

Title: T ( ) Delete  
Name: MARAJ, HEMRAJ  
Address: 2889 CULLENS COURT  
City-St-Zip: OCOEE, FL 34761

Title: T ( ) Delete  
Name: BAJRANGI, RAJENDRA  
Address: 784 SILVER SMITH CIRCLE  
City-St-Zip: LAKE MARY, FL 32746

Title: T ( ) Delete  
Name: TIWARI, BASMATTIE  
Address: 677 EDGEWOOD DRIVE  
City-St-Zip: WESTBURY, NY 11590

Title: T ( ) Delete  
Name: PERSAUD, KRISHNA  
Address: 89-13 212TH STREET  
City-St-Zip: QUEENS VILLAGE, NY 11427

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T (X) Change ( ) Addition  
Name: RAMNARAIN, VYASA  
Address: 31349 WESTWARD HO AVE  
City-St-Zip: SORRENTO, FL 32776

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: VISHNU RAMNARINE

RA

03/07/2009

Electronic Signature of Signing Officer or Director

Date