2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 08, 2007
Secretary of State

DOCUMENT# N05000003619

Entity Name: GUJARATI SOCIETY OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

6340 RALEGH ST
APT 1001
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

6340 RALEGH ST
APT 1001
ORLANDO, FL 32835

New Mailing Address:

FEI Number: 59-3659548 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VYAS, BHAILAL
6340 RALIEGH ST
APT 1001
ORLANDO, FL 32835 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:	PATEL, VINOD M	
Address:	7041 GRAND NATIONAL DR., SUITE 200	
City-St-Zip:	ORLANDO, FL 32819	
Title:	VP	( ) Delete
Name:	PATEL, KALPANA M.D.	
Address:	7575 DR. PHILLIPS BLVD STE: 10	
City-St-Zip:	ORLANDO, FL 32819	
Title:	S	( ) Delete
Name:	PATEL, RASHMI	
Address:	8441 TIVOLI DR.	
City-St-Zip:	ORLANDO, FL 32836	
Title:	T	( ) Delete
Name:	VYAS, BHAILAL	
Address:	6340 RALEIGH STREET # 1001	
City-St-Zip:	ORLANDO, FL 32835	
Title:	VP	( ) Delete
Name:	TAILOR, DRAKASH DR	
Address:	4731 CAKE CALABAY DR	
City-St-Zip:	ORLANDO, FL 32837	

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:	( ) 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: BHAILAL VYAS T 08/08/2007
Electronic Signature of Signing Officer or Director — Date