

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 20, 2006 8:00 am**  
**Secretary of State**

02-20-2006 90034 050 \*\*\*\*70.00

**DOCUMENT # N05000012610**

1. Entity Name  
**LITERATEINDIA INC.**



Principal Place of Business  
**8282 WESTERN WAY CIRCLE  
SUITE 1123  
JACKSONVILLE, FL 32256 US**

Mailing Address  
**8282 WESTERN WAY CIRCLE  
SUITE 1123  
JACKSONVILLE, FL 32256 US**

00013063



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02112006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**20-3981410**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SINGH, SUKHBIR  
8282 WESTERN WAY CIRCLE  
SUITE 1123  
JACKSONVILLE, FL 32256**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
SINGH, SUKHBIR  
12180 LAKE FERN DRIVE  
JACKSONVILLE, FL 32258** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CHAIRPERSON  
SUSAN STARLING  
5301 GOLF DR.  
VALDOSTA, GA** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
SINGH, PRIYADARSHINI  
12180 LAKE FERN DRIVE  
JACKSONVILLE, FL 32258** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
KADIAN, SANDEEP K  
941 SECTOR 7 URBAN ESTATE  
KURUKSHETRA, HARYANA, INDIA 132118** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
KADIAN, SANDEEP K  
VPO KATLEHRI, DISTT. KARNAL  
STATE HARYANA, INDIA, . .** ☒ Delete

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Sundar Singh*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/1/2006**

**904 448 1081**

Daytime Phone #