

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000970

FILED
Jan 06, 2009
Secretary of State

Entity Name: GANDHI MEMORIAL SOCIETY INC.

Current Principal Place of Business:

10535 BROOMSEDGE CT
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

10535 BROOMSEDGE CT
JACKSONVILLE, FL 32246

New Mailing Address:

FEI Number: 11-3766445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BAZAZ, ASHOK K
10535 BROOMSEDGE CT
JACKSONVILLE, FL 32246 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: C () Delete
Name: VASHI, RAMESH
Address: 10520 CRESTON GLEN CIRCLE
City-St-Zip: JACKSONVILLE, FL 32256

Title: P () Delete
Name: BAZAZ, ASHOK K
Address: 10535 BROOMSEDGE CT
City-St-Zip: JACKSONVILLE, FL 32246

Title: V () Delete
Name: PATEL, DAXESH
Address: 979 HYANNIS PORT DR
City-St-Zip: JACKSONVILLE, FL 32225

Title: S () Delete
Name: JOSHI, PRAKASH
Address: 2725 R S BAILEY DR E
City-St-Zip: JACKSONVILLE, FL 32246

Title: T () Delete
Name: SRINIVASAN, RAJASEKAR
Address: 2019 KNOTTINGHAM TRACE LANE
City-St-Zip: JACKSONVILLE, FL 32246

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: S (X) Change () Addition
Name: GUPTA, RAJIV
Address: 3269 ABBEYFIELD DRIVE E>
City-St-Zip: JACKSONVILLE, FL 32277

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: RAJIV GUPTA

S

01/06/2009

Electronic Signature of Signing Officer or Director

Date