

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001133

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: SOHAM BABA MISSION INC.

## Current Principal Place of Business:

515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301

## New Principal Place of Business:

515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

## Current Mailing Address:

515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301

## New Mailing Address:

515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

FEI Number: 14-1950807

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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: SWAMI SUDIPANANDA GIRIJI MAHARA  
Address: NOORDSTRAAT 27, 5141 JA WAALWIJK  
City-St-Zip: THE NETHERLANDS,

Title: V ( ) Delete  
Name: SWEET, NELAN  
Address: 2000 TOWERSIDE TERRAE APR. 507  
City-St-Zip: MIAMI, FL 33172

Title: ST ( ) Delete  
Name: RAMNATHSING, CHARITA  
Address: 7116 NW 116 COURT  
City-St-Zip: DORAL, FL 33178

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SWAMI SUDIPANANDA GIRIJI MAHARAJ  
Address: NOORDSTRAAT 27, 5141 JA WAALWIJK  
City-St-Zip: THE NETHERLANDS, XX 00000 NL

Title: V (X) Change ( ) Addition  
Name: OLFF, MARJA  
Address: MAUVESTRAAT 44 HUIS, 1073 RH AMSTERDAM  
City-St-Zip: THE NETHERLANDS, XX 00000 NL

Title: ST (X) Change ( ) Addition  
Name: RAMNATHSING, CHARITA  
Address: 515 EAST PARK AVENUE  
City-St-Zip: TALLAHASSEE, FL 32301 US

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: CHARITA RAMNATHSING

ST

04/28/2009

Electronic Signature of Signing Officer or Director

Date