

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003675

Entity Name: SWARALAYA OF TAMPA, INC

FILED  
Jan 09, 2008  
Secretary of State

## Current Principal Place of Business:

530 AUSTIN DR  
TARPON SPRINGS, FL 34688

## New Principal Place of Business:

## Current Mailing Address:

530 AUSTIN DR  
TARPON SPRINGS, FL 34688

## New Mailing Address:

FEI Number: 56-2582744

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NAMAN, SAHASRA M.D.  
530 AUSTIN DR  
TARPON SPRINGS, FL 34688 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: DP ( ) Delete  
Name: GNANASHANMUGAM, CHINNIA  
Address: 121 GRAHAM ST W  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: DV ( ) Delete  
Name: NAMAN, SAHASRA  
Address: 530 AUSTIN DR  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: DT ( ) Delete  
Name: NARAYANAN, RAVI  
Address: 530 AUSTIN DR  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: ST ( ) Delete  
Name: SRIVASAN, VENUGOPAL  
Address: 2845 JARVIS CIRCLE  
City-St-Zip: PALM HARBOR, FL 34683

Title: D ( ) Delete  
Name: DURAI, ANU  
Address: 1692 LAGO BLVD  
City-St-Zip: PALM HARBOR, FL 34685

Title: D ( ) Delete  
Name: RANGANATHAN, NAGARAJAN  
Address: 5031 DEVON PARK DR  
City-St-Zip: TAMPA, FL 33647

## 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: ST (X) Change ( ) Addition  
Name: SRINIVASAN, VENUGOPAL  
Address: 2845 JARVIS CIRCLE  
City-St-Zip: PALM HARBOR, FL 34683

Title: D (X) Change ( ) Addition  
Name: SAMPATH, MALLUR C  
Address: 2769 TREASURER CAY LANE  
City-St-Zip: SEBRING, FL 33875 47

Title: D (X) Change ( ) Addition  
Name: LAKSHMINARASIMHAN, SUBRAMANIAN N  
Address: 18076 ARBOR CREST DR  
City-St-Zip: TAMPA, FL 33647

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: CHINNIA GNANASHANMUGAM

DP

01/09/2008

Electronic Signature of Signing Officer or Director

Date