

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005790

FILED
Jan 31, 2012
Secretary of State

Entity Name: ATLANTIC INDIA ASSOCIATION CORP.

Current Principal Place of Business:

ATLANTIC INDIA ASSOCIATION
542 NW EMBER WAY
JENSEN BEACH, FL 34957 US

New Principal Place of Business:

Current Mailing Address:

ATLANTIC INDIA ASSOCIATION
P.O. BOX 9628
PORT ST. LUCIE, FL 34985 US

New Mailing Address:

FEI Number: 65-0016332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAGARSHETH, BHARAT J
542 NW EMBER WAY
JENSEN BEACH, FL 34957 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
Name: PATEL, MAFATBHAI
Address: ATLANTIC INDIA ASSOCIATION P.O. BOX 9628
City-St-Zip: PORT. ST. LUCIE, FL 34985 US

Title: VP
Name: PATEL, ROHIT
Address: ATLANTIC INDIA ASSOCIATION P.O. BOX 9628
City-St-Zip: PORT. ST. LUCIE, FL 34985 US

Title: SEC
Name: KAPISH, AMRIT
Address: ATLANTIC INDIA ASSOCIATION P.O. BOX 9628
City-St-Zip: PORT. ST. LUCIE, FL 34985 US

Title: TRE
Name: PATEL, RANJEN
Address: ATLANTIC INDIA ASSOCIATION P.O. BOX 9628
City-St-Zip: PORT. ST. LUCIE, FL 34985 US

Title: BD
Name: NAGARSHETH, BHARAT
Address: ATLANTIC INDIA ASSOCIATION P.O. BOX 9628
City-St-Zip: PORT. ST. LUCIE, FL 34957

I hereby 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 all other like empowered.

SIGNATURE: BHARAT NAGARSHETH

BD

01/31/2012

Electronic Signature of Signing Officer or Director

Date