

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011069

Entity Name: SRISAI KRUPANJALI, INC.

FILED  
Mar 25, 2009  
Secretary of State

**Current Principal Place of Business:**

8937 SOUTHERN BREEZE DRIVE  
ORLANDO, FL 32836

**New Principal Place of Business:**

**Current Mailing Address:**

8937 SOUTHERN BREEZE DRIVE  
ORLANDO, FL 32836

**New Mailing Address:**

FEI Number: 20-5912447

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RAJU, ANNAPOORNA  
8937 SOUTHERN BREEZE DRIVE  
ORLANDO, FL 32836 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: D ( ) Delete  
Name: RAJI, ANNAPURNA  
Address: 8937 SOUTHERN BREEZE DRIVE  
City-St-Zip: ORLANDO, FL 32836

Title: D ( ) Delete  
Name: SANKAR, NOCHUR S  
Address: 2336 R 4E LANE  
City-St-Zip: OVIEDO, FL 32765

Title: D ( ) Delete  
Name: ARORA, VINOD  
Address: 6515 CARTMEL LANE  
City-St-Zip: WINDERMERE, FL 34786

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: RAJ, ANNAPOORNA  
Address: 8937 SOUTHERN BREEZE DRIVE  
City-St-Zip: ORLANDO, FL 32836

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANNAPOORNA RAJU

D

03/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date