

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011155

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: NANDI KANNADA KOOTA OF SOUTH FLORIDA, INC

**Current Principal Place of Business:**

4901 GODFREY ROAD  
CORAL SPRINGS, FL 33067

**New Principal Place of Business:**

**Current Mailing Address:**

4901 GODFREY ROAD  
CORAL SPRINGS, FL 33067

**New Mailing Address:**

FEI Number: 13-4346915

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NIRMAL, BHAVANI  
6555 NW 36 STREET  
SUITE 302  
MIAMI, FL 33166 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: PD ( ) Delete  
Name: SURESH, RAMAMANI  
Address: 4901 GODFREY ROAD  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: VPD ( ) Delete  
Name: SRIDHAR, RASHMI  
Address: 142 CABLES BOULEVARD  
City-St-Zip: WESTON, FL 33326

Title: SD ( ) Delete  
Name: RAJA, SREERANJINI  
Address: 18795 MISTY LAKE DR  
City-St-Zip: JUPITER, FL 33458

Title: TD ( ) Delete  
Name: CHITTIUR, GANGADHAR  
Address: 5 S PINE ISLAND ROAD, APT. #111  
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Delete  
Name: BHAT, MAHADEV  
Address: 10521 SW 127TH COURT  
City-St-Zip: MIAMI, FL 33199

**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: TD (X) Change ( ) Addition  
Name: CHITTLUR, GANGADHAR S  
Address: 5 S PINE ISLAND ROAD, APT. #111  
City-St-Zip: PLANTATION, FL 33324

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: CHITTLUR, GANGADHAR

TD

04/26/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date