

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011155

FILED
Jan 16, 2009
Secretary of State

Entity Name: NANDI KANNADA KOOTA OF SOUTH FLORIDA, INC

Current Principal Place of Business:

18795 MISTRY LAKE DRIVE
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

18795 MISTRY LAKE DRIVE
JUPITER, FL 33458

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: RAJA, SREERANJINI
Address: 18795 MISTRY LAKE DRIVE
City-St-Zip: JUPITER, FL 33458

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

Title: SEC () Delete
Name: BANGALORE, GUNASHEKAR
Address: 5474 NW 92 ND AVENUE
City-St-Zip: SUNRISE, FL 33351

Title: TD () Delete
Name: RANGASWAMY, GOVINDRAJ S
Address: 3193 ISLEWOOD AVENUE
City-St-Zip: WESTON, FL 33332

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

Title: D () Delete
Name: SETTY, SHASHI
Address: 117 SAN MARITA WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418

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

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: GOVINDRAJ RANGASWAMY

TD

01/16/2009

Electronic Signature of Signing Officer or Director

Date