2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000864

FILED Jan 25, 2009 Secretary of State

Entity Name: GUJARATI ASSOCIATION OF MANASOTA, INC.

Current Principal Place of Business:				New Principal Place of Business:			
3012, BUCIDA DRIVE SARASOTA, FL 34232				6321 68TH STREET EAST BRADENTON, FL 34203			
Current Mailing Address:				New Mailing Address:			
3012, BUCIDA DRIVE SARASOTA, FL 34232				6321 68TH STREET EAST BRADENTON, FL 34203			
FEI Number:	56-2637591	FEI Number Applied For ()	FEI Numb	ber Not Applicable()	Certificate	e of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
PARIKH, SNEHAL 6321 68TH SREET EAST BRADENTON, FL 34203 US							
The above r		bmits this statement for the pur	rpose of	changing its registere	d office or re	gistered agent, or both,	
SIGNATURE:							
	Electronic	Signature of Registered Agent	nt			ate	
OFFICERS AND DIRECTORS:			,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	C () D PATEL, SHANTU 4703 N TAMIAMI SARASOTA, FL		1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () E PARIKH, SNEHAL 6321 68TH STRE BRADENTON, FL	ET DR EAST	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () C PATHAK, BIREN I 4216 70TH STRE PALMETTO, FL	ET EAST	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TS () E SOLANKI, HIMAT 3012 BUCIDA DR SARASOTA, FL	IVE	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	M () E PATEL, LALIT 8032 WARWICK UNIVERSITY PAR		1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	M () C SHAH, AVANI 6194 9TH AVE CI BRADENTON, FL		1	Title: Name: Address: City-St-Zip:	() Change () Addition	
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.							

Electronic Signature of Signing Officer or Director

SIGNATURE: SNEHAL PARIKH

01/25/2009 Date

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