

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004887

FILED  
Apr 03, 2012  
Secretary of State

**Entity Name:** SHIV SHAKTI ASHRAM, INC.

**Current Principal Place of Business:**

209 SE 19TH LN  
CAPE CORAL, FL 33990 US

**New Principal Place of Business:**

**Current Mailing Address:**

209 SE 19TH LN  
CAPE CORAL, FL 33990 US

**New Mailing Address:**

**FEI Number:** 61-1530194

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RADOOPERSAD, GUYATRI S  
209 SE 19TH LN  
CAPE CORAL, FL 33990 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  
**Name:** RADOOPERSAD, DEODATH  
**Address:** 209 SE 19TH LN  
**City-St-Zip:** CAPE CORAL, FL 33990 US

**Title:** D  
**Name:** RADOOPERSAD, GUYATRI S  
**Address:** 209 SE 19TH LN  
**City-St-Zip:** CAPE CORAL, FL 33990 US

**Title:** D  
**Name:** JOHN, CLAYTON  
**Address:** 209 SE 19TH LN  
**City-St-Zip:** CAPE CORAL, FL 33990 US

**Title:** D  
**Name:** GOKOOL, KAREN  
**Address:** 209 SE 19TH LN  
**City-St-Zip:** CAPE CORAL, FL 33990 US

**Title:** P.  
**Name:** RADOOPERSAD, DEODATH  
**Address:** 209 SE 19TH LN  
**City-St-Zip:** CAPE CORAL, FL 33990 US

**Title:** VP  
**Name:** GOKOOL, KAREN  
**Address:** 209 SE 19TH LN  
**City-St-Zip:** CAPE CORAL, FL 33990 US

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:** SHARON RADOOPERSAD

D

04/03/2012

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

\_\_\_\_\_  
Date