2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008980

FILED Apr 30, 2009 Secretary of State

Entity Name: MALAYALEE ASSOCIATION OF FORT MYERS, INC.

Current Principal Place of Business: New Principal Place of Business: 721 PLUMOSA AVENUE ANTOMONKJ@GMAIL.COM LEHIGH ACRES, FL 33972 LEHIGH ACRES, FL 33972 **Current Mailing Address: New Mailing Address:** 721 PLUMOSA AVENUE LEHIGH ACRES, FL 33972 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ABRAHAM, SAMUEL 721 PLUMÓSA AVENUE LEHIGH ACRES, FL 33972 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ABRAHAM, SAMUEL Name: Name: 721 PLUMOSA AVENUE Address: Address: City-St-Zip: LEHIGH ACRES, FL 33972 City-St-Zip: Title: () Delete Title: (X) Change () Addition JOHNSON, SAJI Name: G, ASHOK KUMAR Name: Address: 2735 COLONIAL BLVD, APT, 207 Address: 2755 COLONIAL BLVD #101 City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33907 Title: Title: (X) Change () Addition () Delete JOHN, ANIL P JOSEPH, ANTOMON Name: Name: 2737 COLONIAL BLVD, APT. 101 15360 SONOMA DRIVE #204 Address: Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33908 Title: JS () Delete Title: JS (X) Change () Addition Name: ABRAHAM, BLESSY J Name: KURUVILA, KURUVILA 2753, COLONIAL BLVD, APT. 208 2727 COLONIAL BLVD Address: Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33907 Title: () Delete Title: (X) Change () Addition KUMAR, HARI KORAYA, GILBERT Name: Name: 4127 RESIDENCE DR APT 4706 2755 COLONIAL BLVD #101 Address: Address: City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: FORT MYERS, FL 33907

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: ANTOMON JOSEPH S 04/30/2009