

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011930

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** BHAKTIVEDANTA GAUDIYA INSTITUTE, INC.

**Current Principal Place of Business:**

15281 NW HWY 441 SUITE 30A  
ALACHUA, FL 32615

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1530  
ALACHUA, FL 32616

**New Mailing Address:**

**FEI Number:** 26-1682967

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AKRIKGE, ERIC  
10308 NW 209 LANE  
ALACHUA, FL 32615 US

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

DAVIDSON, GARY  
17909 NW CR 239  
ALACHUA, FL 32616 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: GARY DAVIDSON

04/25/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: AKRIDGE, ERIC  
Address: 10308 NW 209 LANE  
City-St-Zip: ALACHUA, FL 32615

Title: D  
Name: SMITH, RONALD  
Address: 13605 NW CR 235 #1502  
City-St-Zip: ALACHUA, FL 32615

Title: D  
Name: DAVIDSON, GARY  
Address: P.O. BOX 2243  
City-St-Zip: ALACHUA, FL 32615

Title: D  
Name: JOHNSTON, EDMUND R  
Address: P.O. BOX 1922  
City-St-Zip: ALACHUA, FL 32616

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: GARY DAVIDSON

SEC

04/25/2011

Electronic Signature of Signing Officer or Director

Date