

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008289

FILED
Jun 17, 2009
Secretary of State

Entity Name: HINDU SANATAN TEMPLE, INC.

Current Principal Place of Business:

19 W JEFFERSON STREET
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

19 W JEFFERSON STREET
QUINCY, FL 32351

New Mailing Address:

FEI Number: 26-3296195 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PATEL, PRADIP S
1737 BEAVER CREEK DR
HAVANA, FL 32333 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:

Title: D () Delete
Name: SHAH, TAROON N
Address: 180 VINEYARD WAY
City-St-Zip: TALLAHASSEE, FL 32317

Title: D () Delete
Name: PATEL, PRADIP S
Address: 1737 BEAVER CREEK DR
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: PATEL, MUKESH
Address: 4780 HEDGE WOOD DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: PATEL, MRUGESH
Address: 1350 W TENNESSEE STREET
City-St-Zip: TALLAHASSEE, FL 32304

Title: D () Delete
Name: PATEL, YOGESH
Address: 21 YVONA CT
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: BHAKTA, BHARATBHAI
Address: 3705 WOODVILLE HWY
City-St-Zip: TALLAHASSEE, FL 32305

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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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: PRADIP S PATEL

D

06/17/2009

Electronic Signature of Signing Officer or Director

Date