

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008289

FILED  
Apr 19, 2010  
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 ( )**

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

PATEL, PRADIP S  
1737 BEAVER CREEK DR  
HAVANA, FL 32333 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: SHAH, TAROON N  
Address: 180 VINEYARD WAY  
City-St-Zip: TALLAHASSEE, FL 32317

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

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

Title: D  
Name: BHAKTA, JITUBHAI  
Address: 5239 OAK DR  
City-St-Zip: MARIANNA, FL 32446

Title: D  
Name: PATEL, PARESH  
Address: 2114 PAT THOMAS PKWY  
City-St-Zip: QUINCY, FL 32351

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

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:** P PATEL

PRES

04/19/2010

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

\_\_\_\_\_  
Date