2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2009
Secretary of State

DOCUMENT# N08000009277

Entity Name: ORLANDO REGIONAL UNITED MALAYALEE ASSOCIATION INC.

Current Principal Place of Business:

7555 CRANES CREEK CT
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

7555 CRANES CREEK CT
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 26-3517061 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHAKKINGAL, NANDA KUMAR
7555 CRANES CREEK CT
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

NANDAKUMAR, CHAKKINGAL
7555 CRANES CREEK CT
WINTER PARK, FL 32792 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: SAJI JOHN 01/29/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CHAKKINGAL, NANDAKUMAR
Address: 7555 CRANES CREEK CT
City-St-Zip: WINTER PARK, FL 32792

Title: VP ( ) Delete
Name: THOMAS, VARGHESE
Address: 7555 CRANES CREEK CT
City-St-Zip: WINTER PARK, FL 32792

Title: VP ( ) Delete
Name: KUYILADAN, PAULOSE
Address: 7555 CRANES CREEK CT
City-St-Zip: WINTER PARK, FL 32792

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SAJI, JOHN
Address: 7555 CRANES CREEK CT
City-St-Zip: WINTER PARK, FL 32792

Title: VP (X) Change ( ) Addition
Name: VARGHESE, JOSEPH
Address: 7555 CRANES CREEK CT
City-St-Zip: WINTER PARK, FL 32792

Title: VP (X) Change ( ) Addition
Name: NANDAKUMAR, CHAKKINGAL
Address: 7555 CRANES CREEK CT
City-St-Zip: WINTER PARK, FL 32792

Title: VP ( ) Change (X) Addition
Name: SATHYANARAYANAN, MELEKALATHIL
Address: 7555 CRANES CREEK CT
City-St-Zip: WINTER PARK, FL 32792

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: SAJI JOHN P 01/29/2009
Electronic Signature of Signing Officer or Director Date