

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16353

FILED
Jul 07, 2008
Secretary of State

Entity Name: THE SIKH SOCIETY OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2527 WEST SR 426 ALOMA RD
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

2527 WEST SR 426 ALOMA RD
OVIEDO, FL 32765 US

New Mailing Address:

FEI Number: 59-2757722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

CHEHAL, T.S.
2527 WEST SR 426 ALOMA RD
OVIEDO, FL 32765 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: T () Delete
Name: CHEHAL, T.S.
Address: 2527 WEST SR 426 ALOMA RD
City-St-Zip: OVIEDO, FL 32765 US

Title: D () Delete
Name: AUJLA, KAMALJEET S MR
Address: 2527 W SR 426
City-St-Zip: OVIEDO, FL 32707

Title: D () Delete
Name: BHATIA, JASBIR S
Address: 2527 WEST SR 426 ALOMA RD
City-St-Zip: OVIEDO, FL 32765 US

Title: T () Delete
Name: SINGH, JARNAIL
Address: 2527 WEST SR 426 ALOMA RD
City-St-Zip: OVIEDO, FL 32765 US

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

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

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
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: SINGH, NARINDER
Address: 2527WEST SR 426 ALOMA ROAD
City-St-Zip: OVIEDO, FL 32765 US

Title: D () Change (X) Addition
Name: SINGH, HARBIR
Address: 2527WEST SR 426 ALOMA ROAD
City-St-Zip: OVIEDO, FL 32765 US

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: KAMALJEET S AUJLA

D

07/07/2008

Electronic Signature of Signing Officer or Director

_____ Date