2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17911

FILED Apr 27, 2007 Secretary of State

Entity Name: UNITED SIKH RELIGIOUS AND EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 15302 MORRIS BRIDGE RD THONOTOSASSA, FL 33592 US **Current Mailing Address: New Mailing Address:** 35250 LAKE EDWARD DR. 15302 MORRIS BRIDGE RD ZEPHYRHILLS, FL 33541 US THONOTOSASSA, FL 33592 US FEI Number: 59-2749003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DHALLA, DS 35250 LÁKE EDWARD DR ZEPHYRHILLS, FL 33541 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BRAR, SARDUL SINGH Name: Name: Address: 943 HAMILTON PL LN Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: Title: Title: () Delete () Change () Addition Name: SINGH, GURSAGAR Name: Address: 2892 PHEASANT DR. Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: Title: () Delete Title: (X) Change () Addition GLAMOR, TEJINDER S Name: GLAMOUR, TEJINDER S Name: 8786 BAYWOOD PARK DR. 8786 BAYWOOD PARK DR. Address: Address: City-St-Zip: SEMINOLE, FL 33777 City-St-Zip: SEMINOLE, FL 33777 Title: () Delete Title: () Change () Addition Name: SINGH, SETHI D Name: Address: 1821 TANGLED VINE DR Address: City-St-Zip: WESLEY CHAPEL, FL 33543 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: SETHI D SINGH D 04/27/2007