

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21432

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** HINDU SOCIETY OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

1994 LAKE DRIVE  
CASSELBERRY, FL 32707 US

**New Principal Place of Business:**

**Current Mailing Address:**

1994 LAKE DRIVE  
CASSELBERRY, FL 32707 US

**New Mailing Address:**

**FEI Number:** 59-2873718

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NALLAMSHETTY, ADINARAYANMURT DR  
1994 LAKE DR  
CASSELBERRY, FL 32707 US

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

MISTRY, HASMUKH H  
1994 LAKE DR  
CASSELBERRY, FL 32707 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: HASMUKH MISTRY

04/29/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CHR  
Name: PATEL, RAJESH DR  
Address: 1994 LAKE DRIVE  
City-St-Zip: CASSELBERRY, FL 32707

Title: TREA  
Name: MISTRY, HASMUKH H MR  
Address: 1994 LAKE DRIVE  
City-St-Zip: CASSELBERRY, FL 32707

Title: PRES  
Name: JARGULA, SRINIVAS MR.  
Address: 1994 LAKE DRIVE  
City-St-Zip: CASSELBERRY, FL 32707

Title: V-PR  
Name: SWAMI, JAYALAKSHMI MRS  
Address: 1994 LAKE DRIVE.  
City-St-Zip: CASSELBERRY, FL 32707

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: HASMUKH MISTRY

TREA

04/29/2010

Electronic Signature of Signing Officer or Director

Date