

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 28, 2008
Secretary of State

DOCUMENT# N34702

Entity Name: HINDU UNIVERSITY OF AMERICA, INC.**Current Principal Place of Business:**113 ECONLOCKHATCHEE TRAIL
ORLANDO, FL 32825 US**New Principal Place of Business:****Current Mailing Address:**113 ECONLOCKHATCHEE TRAIL
ORLANDO, FL 32825 US**New Mailing Address:****FEI Number:** 59-2977691**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CHALLA, SRIKRISHNA
113 N ECONLOCKHATCHEE TRAIL
ORLANDO, FL 32825 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 () Delete
Name: SWAMI, SRINITHYANANDA
Address: 928 HUNTINGTON DRIVE APT#5
City-St-Zip: DUARTE, CA 91010 US

Title: D () Delete
Name: DORAIRAJ, RAMPRASHANTH
Address: 7699 PALMILLA DR. APT#3218
City-St-Zip: SAN DIEGO, CA 92122 US

Title: D () Delete
Name: ADVAITANANDA, NITHYA
Address: 928 HUNTINGTON DRIVE APT#4
City-St-Zip: DUARTE, CA 91010 US

Title: D () Delete
Name: BALARAM, AKHILA
Address: 12555 SUNSET DR
City-St-Zip: ST. LOUIS, MO 63128 US

Title: D () Delete
Name: SHEELAM, GOPAL R
Address: 928 HUNTINGTON DRIVE APT#6
City-St-Zip: DUARTE, CA 91010 US

Title: D () Delete
Name: GUNTUPALLI, KALPALATHA K
Address: 4140 OBERLIN
City-St-Zip: HOUSTON, TX 77005 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CHALLA, SRIKRISHNA
Address: 113 N ECONLOCKHATCHEE TRAIL
City-St-Zip: ORLANDO, FL 32825 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DWIVEDI, ABHINAV
Address: 113 N ECONLOCKHATCHEE TRAIL
City-St-Zip: ORLANDO, FL 32825 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: SRIKRISHNA CHALLA

D

10/28/2008

Electronic Signature of Signing Officer or Director

Date