2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45488

FILED Apr 29, 2009 Secretary of State

Entity Name: ILANKAI THAMIL SANGAM, FLORIDA CHAPTER, INC.

Current Principal Place of Business: New Principal Place of Business:

4702 NW 120 WAY 10116 NW 34TH ST.

CORAL SPRINGS, FL 33076 CORAL SPRINGS, FL 33065 US US

Current Mailing Address: New Mailing Address:

4702 NW 120 WAY 10116 NW 34TH ST.

CORAL SPRINGS, FL 33076 US CORAL SPRINGS, FL 33065 US

FEI Number: 65-0291924 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:

KAILASAPILLAI, SINNADURAI 10116 NW 34TH ST CORAL SPRINGS, FL 33065

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:

Date

Electronic Signature of Registered Agent

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BALASUBRAMANIAM, KIRUDDINAN KAILASAPILLAI, SINNADURAI Name: Name:

4702 NW 120TH WAY Address: 10116 NW 34TH ST. Address: City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip: CORAL SPRINGS, FL 33065

Title: Title:

() Delete () Change () Addition JAYANTHAN, SHANTHINI Name: Name:

Address: 15803 CYPRESS PARK DRIVE Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip:

Title: () Delete Title: (X) Change () Addition SRIGANESH, VATHANY Name: THEVARAJAH, KANDAVANAM Name:

6841 SW 71ST AVE. Address: 2241 180TH AVE. Address: City-St-Zip: MIRAMAR, FL 33029 City-St-Zip: MIAMI, FL 33143

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: SINNADURAI KAILASAPILLAI PD 04/29/2009