

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47413

FILED
Apr 20, 2011
Secretary of State

Entity Name: INDIA CULTURAL AND EDUCATION CENTER, INC.

Current Principal Place of Business:

1115 S.W. 13TH STREET
GAINESVILLE, FL 32608 US

New Principal Place of Business:

Current Mailing Address:

10609 SW 12 TERRACE
MICANOPY, FL 32667 US

New Mailing Address:

FEI Number: 59-3112858 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DR. RAMAKANT SRIVASTAVA
10609 SW 12 TERRACE
MICANOPY, FL 32667 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: VP
Name: SITHARAM, MEERA PH.D.
Address: 2223 NW 20TH CT
City-St-Zip: GAINESVILLE, FL 32605

Title: P
Name: SANKAR, BHAVANI PH D
Address: 5538 SW 97 TERRACE
City-St-Zip: GAINESVILLE, FL 32608

Title: AT
Name: PATHAK, PRAVEEN
Address: 8325 SW 16 PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: SEC
Name: SRIVASTAVA, RAMAKANT PH D
Address: 10609 SW 12 TERRACE
City-St-Zip: GAINESVILLE, FL 32667

Title: D
Name: SAHNI, NEETA
Address: 709 SW 80 BLVD
City-St-Zip: GAINESVILLE, FL 32607 US

Title: T
Name: QAIYUMI, SHAHEDA MD
Address: 4016 NW 78 TERRACE
City-St-Zip: GAINESVILLE, FL 32606

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: RSRIVASTAVA

SEC

04/20/2011

Electronic Signature of Signing Officer or Director

Date