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Apr 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N92000000250 (2)
1. Corporation Name
FLORIDA-NEPAL ASSOCIATION, INC.



Principal Place of Business: 6320 NW 33RD TERRACE, GAINESVILLE FL 32606
Mailing Address: 6320 NW 33RD TERRACE, GAINESVILLE FL 32653-1300

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		1368		11/13/1992		04/16/1996	
22		27		4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		N. 59-3152163		Not Applicable	
23		28		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State		<input type="checkbox"/>			
Jacksonville, FL		Jacksonville, FL		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
24		25		29		30	
Zip		Country		Zip		Country	
32259				32259			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

9. Name and Address of Current Registered Agent
LAMSAL, RAJEEB K
8715 BELLE RIVE BLVD APT 3202
JAX FL 32258

10. Name and Address of New Registered Agent
81 Name LAMSAL, RAJEEB K
82 Street Address (P.O. Box Number is Not Acceptable) 1368 Mallard Landing Blvd. N.
83
84 City Jacksonville FL 85 Zip Code 32259

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Rajeeb K. Lamsal, President DATE 4/11/97

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	MALI, TIRTHA	
STREET ADDRESS	6320 NW 33RD TERRACE	
CITY-ST-ZIP	GAINESVILLE FL 32606	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LAMSAL, RAJEEB	
STREET ADDRESS	6508 WAR ADMIRAL TRAIL	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	ISD	<input checked="" type="checkbox"/> DELETE
NAME	SHRESTHA, RAMESH	
STREET ADDRESS	4713 NW 53RD ST	
CITY-ST-ZIP	GAINESVILLE FL 32606	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	SHRESTHA, RAJENDRA	
STREET ADDRESS	13338 FALCON POINTE DR	
CITY-ST-ZIP	ORLANDO FL 32837	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	MALAKAR, SUBARNA	
STREET ADDRESS	12017 SW 12TH PLACE	
CITY-ST-ZIP	GAINESVILLE FL 32607	
TITLE	MAL	<input type="checkbox"/> DELETE
NAME	SATYAL, AJAY	
STREET ADDRESS	328 EMERSON CIRCLE	
CITY-ST-ZIP	PALM SPRINGS FL 33467	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	Information Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Saroj Shukla	
1.3 STREET ADDRESS	5225 NW 64th Blvd.	
1.4 CITY-ST-ZIP	Gainesville, FL 32606	
2.1 TITLE	President, D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Lamsal, Rajeeb K	
2.3 STREET ADDRESS	1368 Mallard Landing Blvd. N.	
2.4 CITY-ST-ZIP	Jacksonville, FL 32259	
3.1 TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Dr. Sundar Shrestha	
3.3 STREET ADDRESS	8203 NW 31st Avenue, Apt. # G-45	
3.4 CITY-ST-ZIP	Gainesville, FL 32606	
4.1 TITLE	General Secretary, D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Dharma Acharya	
4.3 STREET ADDRESS	157 Seaside Circle	
4.4 CITY-ST-ZIP	Pointe Verda, FL 32082	
5.1 TITLE	Member at Large	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Anu Pant	
5.3 STREET ADDRESS	1950 Paine Ave., Apt. 31	
5.4 CITY-ST-ZIP	Jacksonville, FL 32211	
6.1 TITLE	Vice President, D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Satyal, Ajay	
6.3 STREET ADDRESS	328 Emerson Circle	
6.4 CITY-ST-ZIP	Palm Springs, FL 33467	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)