

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000250

FILED  
Feb 19, 2006  
Secretary of State

Entity Name: FLORIDA-NEPAL ASSOCIATION, INC.

**Current Principal Place of Business:**

6320 NW 33RD TERRACE  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

1368 MALLARD LANDING BLVD. N.  
JACKSONVILLE, FL 32259 US

**New Mailing Address:**

FEI Number: 59-3152163      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LAMSAL, RAJEEB K  
1368 MALLARD LANDING BLVD. N.  
JACKSONVILLE, FL 32259 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: PD ( ) Delete  
Name: TIWARI, KHUSI RAM DR.  
Address: 10112 TWISTING VINE CT  
City-St-Zip: TALLAHASSEE, FL 32312

Title: DVP ( ) Delete  
Name: UPADHYAYA, PRATIMA DR.  
Address: 9413 CHART HOUSE CRT  
City-St-Zip: TAMPA, FL 33569

Title: T ( ) Delete  
Name: KHANAL, HARIHAR DR.  
Address: 3780 S. CLYDE MORRIS BLVD., # 1602  
City-St-Zip: PORT ORANGE, FL 32129

Title: GS ( ) Delete  
Name: JOSHI, SUNDAR  
Address: 132 TUSCANY DRIVE  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: IS ( ) Delete  
Name: JOSSE, PABITRA R  
Address: 12408 HAWKEYE POINT PLACE  
City-St-Zip: RIVERVIEW, FL 33569

Title: MAL ( ) Delete  
Name: MALI, RADHA  
Address: 6320 NW 33RD TERR  
City-St-Zip: GAINESVILLE, FL 32606

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T (X) Change ( ) Addition  
Name: KHANAL, HARIHAR DR.  
Address: 1854 BETH CT.  
City-St-Zip: PORT ORANGE, FL 32128

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

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 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: HARIHAR KHANAL

T

02/19/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date