

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000067

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** DEV NARAYAN MD INDO - US FOUNDATION, INC.

**Current Principal Place of Business:**

226-GOLDEN GATE POINT  
APT. 64  
SARASOTA, FL 34236 US

**New Principal Place of Business:**

**Current Mailing Address:**

226-GOLDEN GATE POINT  
APT. 64  
SARASOTA, FL 34236 US

**New Mailing Address:**

**FEI Number:** 65-0470970

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NARAYAN, DEV MD  
226-GOLDEN GATE POINT  
APT. 64  
SARASOTA, FL 34236 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: DP  
Name: NARAYAN, DEV MD  
Address: 226 GOLDEN GATE POINT - APT. 64  
City-St-Zip: SARASOTA, FL 34236 US

Title: D  
Name: NARAYAN, GEETHA R  
Address: 8-OCEAN DR.  
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: D  
Name: LORICCO, CARLO CPA  
Address: 4161 TAMiami TRAIL - SUITE 501  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

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: DEV NARAYAN.

DP

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date