

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000003275

1. Entity Name

INDIAN ASSOCIATION OF POLK COUNTY, INC.

FILED

Feb 14, 2002 8:00 am
Secretary of State

02-14-2002 90081 032 ****61.25

Principal Place of Business

47223 HIGHLANDS PLACE DRIVE
LAKELAND FL 33843
US

Mailing Address

P.O. BOX 7181
LAKELAND FL 33801
US

2. Principal Place of Business
1792 1/2 HWY 92 West

3. Mailing Address
P.O. Box 7181,

Suite, Apt. #, etc.
Auburndale,

Suite, Apt. #, etc.

City & State
Auburndale FL

City & State
Lakeland FL 33807

Zip
33823

Country
USA

Zip
33807

Country
USA

4. FEI Number: 59-3327187

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PATEL, C.N.
4723 HIGHLANDS PLACE DR.
LAKELAND FL 33813

Name
HASMUKH M. PATEL
Street Address (P.O. Box Number is Not Acceptable)
1702 1/2 HWY 92 West,
Auburndale, FL 33823
City
FL Zip Code
33823

8. 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 *x Hasmukh M Patel*
Signature, typed or printed name of registered agent and title if applicable.

01/25/2002
DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PATEL, JAYANT J
5532 HIGHLAND VISTA CIRCLE
LAKELAND FL 33813 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
HASMUKH M. PATEL
1702 1/2 HWY 92 West,
Auburndale, FL 33823 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
PATEL, MASHMUKH
1702 1/2 HWY 92 WEST
AUBURNDAL FL 33823 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
Dilip V. Patel
1411 N.Lake Ave, Avon Park, FL
33825 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
PATEL, ROHIT D
3520 CLEVELAND HTS BLVD
LAKELAND FL 33803 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V.P. Dilip J. Patel
4711 Highlands Place Dr,
Lakeland FL 33813 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
PATEL, NAVINBHAI U
4703 KIMBALL CT WEST
LAKELAND FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D. Rohit Patel
2322 Couples Dr,
LAKELAND FL 33813 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
PATEL, C N
4723 HIGHLANDS PLACE DR
LAKELAND FL 33813 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D. Arun P. Shah
1117, Hunts Ave,
Lakeland, FL 33801 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TR
PATEL, CIANDRAVADAN
2339 MILES COURT
LAKELAND FL 33813 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED *x Hasmukh M Patel* 01-25-2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)