

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 17, 2007 8:00 am**  
**Secretary of State**

04-17-2007 90059 013 \*\*\*\*70.00

**DOCUMENT # N95000005851**

1. Entity Name

PANHANDLE HINDU INDIAN ASSOCIATION., INC.



Principal Place of Business

JITENDRA J. BHAKTA  
5239 PAK DR  
MARIANNA FL 32446

Mailing Address

PNAHANDLE HINDU INDIAN ASSC.  
P.O. BOX 541  
LYNN HAVEN FL 32444



2. Principal Place of Business - No P.O. Box #

541

3. Mailing Address

P. O. BOX 541

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

PATEL, DAHYABHAI V  
2005 W. HARBOUR DR. (2005 W. HARBOUR DR.)  
LYNN HAVEN FL 32444

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature of officer or director of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE 4/6/07

**FILE NOW: FEE IS \$61.25**

**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME BHAKTA, JITENDRA  
STREET ADDRESS 5239 OAK DR  
CITY ST-ZIP MARIANNA FL 32446

TITLE V ☐ Delete  
NAME PATEL, JAYESH  
STREET ADDRESS 207 HWY 231  
CITY ST-ZIP PANAMA CITY FL 32405

TITLE S ☐ Delete  
NAME BHAILTA, JAVESH  
STREET ADDRESS 8042 US HWY 98 W  
CITY ST-ZIP PORT SAINT JOE FL 32456

TITLE BOD ☐ Delete  
NAME SHAH, MAHESH  
STREET ADDRESS 504 PARKWOOD DR  
CITY ST-ZIP PANAMA CITY FL 32405

TITLE T ☐ Delete  
NAME PATEL, DAHYABHAI V  
STREET ADDRESS 2005 W. HARBOUR DR.  
CITY ST-ZIP LYNN HAVEN FL 32444

TITLE CN ☐ Delete  
NAME PATEL, SHILA  
STREET ADDRESS 102 AROTKAUT RD  
CITY ST-ZIP PANAMA CITY BEACH FL 32413

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE SECRETARY ☐ Change ☐ Addition  
NAME BHAKTA JAYESH  
STREET ADDRESS 8042 US HWY 98 W.  
CITY ST-ZIP PORT SAINT JOE, FL 32456  
**CORRECTION**

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

*D. Patel*

D.V. PATEL

(TREASURER)