## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000006444

FILED Jan 11, 2004 Secretary of State

Entity Name: LALIT K. & ANUBHA GUPTA FAMILY FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3520 SHORELINE CIRCLE PALM HARBOR, FL 34684 **Current Mailing Address: New Mailing Address:** 3520 SHORELINE CIRCLE PALM HARBOR, FL 34684 US FEI Number: 59-3414979 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GASSMAN, ALAN S GULECAS, JAMES F 1245 COURT STREET, STE. 102 1968 BAYSHORE BLVD CLEARWATER, FL DUNEDIN, FL 34698 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: JAMES F. GULECAS 01/11/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GUPTA, LALIT K Name: Name: 3520 SHORELINE CIRCLE Address: Address: City-St-Zip: PALM HARBOR, FL City-St-Zip: Title: DS ( ) Delete Title: () Change () Addition Name: GUPTA, ANUBHA Name: Address: 3520 SHORELINE CIRCLE Address: City-St-Zip: PALM HARBOR, FL City-St-Zip: Title: () Delete Title: () Change () Addition GUPTA, ARJUN Name: Name: 3520 SHORELINE CIRCLE Address: Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: GUPTA, ADITI Name: 3520 SHORELINE CIR Address: Address: City-St-Zip: PALM HARBOR, FL City-St-Zip: Title: () Delete Title: () Change () Addition GUPTA, VAANI Name: Name: 3520 SHORELINE CIR Address: Address: PALM HARBOR, FL City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition GUPTA, ANJNA Name: Name: Address: 3505 DEER RUN DRIVE Address: SPRINGFIELD, IL 62707 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LALIT K. GUPTA DP 01/11/2004