

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002516

FILED
Jan 20, 2009
Secretary of State

Entity Name: TELUGU ASSOCIATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

15726 SW 17 ST
DAVIE, FL 33326

New Principal Place of Business:

Current Mailing Address:

15726 SW 17 ST
DAVIE, FL 33326

New Mailing Address:

FEI Number: 65-0831624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALJDHINDI, SANTI
15726 SW 17 ST.
DAVIE, FL 33326 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: P () Delete
Name: DHANEKULA, NANDAIAH
Address: 7889 EMERALD WINDS CIR
City-St-Zip: BOYNTON BEACH, FL 33473

Title: VP () Delete
Name: ANIL, LAKUM
Address: 9338 SAVANNAH ESTATES DR
City-St-Zip: LAKE WORTH, FL 33467

Title: T () Delete
Name: VEERAMACHANENI, PUSHYAMITRA
Address: 9435 SW 140 CT
City-St-Zip: MIAMI, FL 33186

Title: T () Delete
Name: POLAVARAPU, JAYARAM
Address: 4200 NW 26 AVE
City-St-Zip: BOCA RATON, FL 33434

Title: T () Delete
Name: YALAMANCHI, BOSE
Address: 5232 LEITNER DR
City-St-Zip: POMPANO BEACH, FL 33067

Title: T () Delete
Name: PRASAD, U.S.
Address: 121 PUFFIN CT
City-St-Zip: WEST PALM BEACH, FL 33411

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: KOPPU, VANDANA
Address: 14336 SW 158 PLACE
City-St-Zip: MIAMI, FL 33196

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 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: NANDAIAH DHANEKULA

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date