## 2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N00022

Entity Name: HINDU TEMPLE OF FLORIDA, INC.

**Current Principal Place of Business:** 

5509 LYNN ROAD TAMPA, FL 33624

**Current Mailing Address:** 

5509 LYNN ROAD TAMPA, FL 33624

FEI Number: 59-2411940 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DERASARI, MANJUL 5509 LYNN RD TAMPA, FL 34624 US

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: MANJUL DERASARI 05/16/2016

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name RAMAPPA, RENUKA DR. Name GUTHIKONDA, SRINIVAS

Address 12134 COBBLESTONE DR Address 2237 STEVEN ST

City-State-Zip: HUDSON FL 34667 City-State-Zip: CLEARWATER FL 33759

TitleSECRETARYTitleJOINT SECRETARYNameBABU, KESHAVA DR.NameMEHTA, MUKESH DR.Address9913 TREETOPS LAKE ROADAddress5509 LYNN ROADCity-State-Zip:TAMPA FL 33626City-State-Zip:TAMPA FL 33624

City-State-Zip: TAMPA FL 33626 City-State-Zip: TAMPA FL 33624

Title TREASURER Title JOINT TREASURER

Name VARMA, SAI Name DASIKA, VIJAY

Address 10574 CORY LAKES DR. Address 15913 LAHINCH CIR.

City-State-Zip: TAMPA FL 33647 City-State-Zip: ODESSA FL 33556

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: KESHAVA BABU SECRETARY

Electronic Signature of Signing Officer/Director Detail

05/16/2016 Date

**FILED** 

May 16, 2016

Secretary of State CC5189876749