

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011549

Entity Name: BHAKTIVEDANTA ACADEMY OF NORTH AMERICA, INC.**Current Principal Place of Business:**17414 NW 112TH BLVD
ALACHUA, FL 32615**Current Mailing Address:**17414 NW 112TH BLVD
ALACHUA, FL 32615 US**FEI Number: 26-3965713****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**AGUILERA, DAVID E
10103 NW 209TH LANE
ALACHUA, FL 32615 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	POURCHOT, THOMAS
Address	17881 NW 105TH TERRACE
City-State-Zip:	ALACHUA FL 32615

Title	DVP
Name	SHARMA, RAKESH
Address	17942 NW 105TH TERRACE
City-State-Zip:	ALACHUA FL 32615

Title	D
Name	PEATIE, TERESA A
Address	4218 NW 234TH AVE
City-State-Zip:	ALACHUA FL 32615

Title	DP
Name	LESLIE, JONATHAN
Address	17763 NW 105TH TERRACE
City-State-Zip:	ALACHUA FL 32615

Title	D
Name	TASSINARE, MIRIAM
Address	14405 NW 146TH AVE
City-State-Zip:	ALACHUA FL 32615

Title	ST
Name	AGUILERA, DAVID E
Address	10103 NW 209TH LANE
City-State-Zip:	ALACHUA FL 32615

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: DAVID AGUILERA**SECRETARY/TREASURER 04/28/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date