

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000006709

Entity Name: SHRUTI FOUNDATION, INC.**Current Principal Place of Business:**5337 STARHILL PL
TAMPA, FL 33624**Current Mailing Address:**5337 STARHILL PL
TAMPA, FL 33624 US**FEI Number:** 47-4865713**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DERIGO-LAHIRI, HEATHER
5337 STARHILL PL.
TAMPA, FL 33624 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	MAJETHIA, SUNHIL M
Address	17924 ARBOR GREEN DR.
City-State-Zip:	TAMPA FL 33647

Title	D
Name	GINDE, YESHAWANT V
Address	10262 ESTURARY DR
City-State-Zip:	TAMPA FL 33647

Title	PTD
Name	LAHIRI, SANKHACHUR
Address	18215 CYPRESS HAVEN DR
City-State-Zip:	TAMPA FL 33647

Title	D
Name	ANKALIKAR, SATISH
Address	5225 EHRlich RD SUITE A
City-State-Zip:	TAMPA FL 33624

Title	D
Name	SHARMA, AVINASH
Address	18201 BITTERN AVE
City-State-Zip:	LUTZ FL 33558

Title	D
Name	DERIGO LAHIRI, HEATHER
Address	18215 CYPRESS HAVEN DR
City-State-Zip:	TAMPA FL 33647

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: HEATHER DERIGO LAHIRI

D

09/18/2017

Electronic Signature of Signing Officer/Director Detail_____
Date