

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000008168

Entity Name: BHAKTIVEDANTA INSTITUTE FOR HIGHER STUDIES INC.**Current Principal Place of Business:**1515 NW 7TH PLACE
GAINESVILLE, FL 32603-1208**Current Mailing Address:**12834 NW 151 RD
ALACHUA, FL 32615 US**FEI Number: 47-5672343****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**SUTTON, BARBARA T
12834 NW 151 RD
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: BARBARA T SUTTON****03/01/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN
Name	COHEN, ROBERT
Address	1515 NW 7TH PLACE
City-State-Zip:	GAINESVILLE FL 32603-1208

Title	CORRESPONDING SECRETARY
Name	SUTTON, BARBARA
Address	12834 NW 151 RD
City-State-Zip:	ALACHUA FL 32615

Title	VC
Name	CHAPAPRIETA, THOMAS P
Address	19121 NW CR 239
City-State-Zip:	ALACHUA FL 32615

Title	DIRECTOR
Name	FLEMING, MARTIN
Address	BUCKLAND
City-State-Zip:	BWLCH, POWYS WALES LD3 7JJ

Title	DIRECTOR
Name	GREENE, JOSHUA
Address	74 OLD WESTBURY ROAD
City-State-Zip:	OLD WESTBURY NY 11568

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: BARBARA T SUTTON**CORRESPONDING
SECRETARY****03/01/2024**

Electronic Signature of Signing Officer/Director Detail

Date