

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 08, 2019
Secretary of State
4313017608CC

Entity Name: HINDU FAMILY SUPPORT SERVICES, INC

Current Principal Place of Business:

17213 BREEDERS CUP DR
ODESSA, FL 33556

Current Mailing Address:

17213 BREEDERS CUP DR
ODESSA, FL 33556 US

FEI Number: 82-2420833

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHARI, LEKHA
15901 DANBORO CT
TAMPA, FL 33647 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: LEKHA CHARI

02/08/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name VENKATARAM, KATHARIGUPPA
Address 17213 BREEDERS CUP DR
City-State-Zip: ODESSA FL 33556

Title S
Name KUMAR, SUBRAMANIAN
Address 28959 WESLEY CHAPEL BOULEVARD
City-State-Zip: WESLEY CHAPEL FL 33543

Title T
Name KANTE, MAHIPAL
Address 28959 WESLEY CHAPEL BOULEVARD
City-State-Zip: WESLEY CHAPEL FL 33543

Title V
Name NANDYALA, MALLIKARJUNA
Address 28959 WESLEY CHAPEL BOULEVARD
City-State-Zip: WESLEY CHAPEL FL 33543

Title D
Name MANKODI, KSHEMAL
Address 28959 WESLEY CHAPEL BOULEVARD
City-State-Zip: WESLEY CHAPEL FL 33543

Title D
Name DESAI, NAINAN
Address 28959 WESLEY CHAPEL BOULEVARD
City-State-Zip: WESLEY CHAPEL FL 33543

Title TREASURER
Name CHARI, LEKHA
Address 15901 DANBORO CT
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: LEKHA CHARI

TREASURER

02/08/2019

Electronic Signature of Signing Officer/Director Detail

Date