

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000006226

FILED
Jul 08, 2002 8:00 AM
Secretary of State

Entity Name: DHAMMA WHEEL MEDITATION SOCIETY INC.

Current Principal Place of Business:

2030 57TH AVE. N.
ST. PETERSBURG, FL 33714

New Principal Place of Business:

2207 BELLEAIR RD
CHATEAU BELLEAIR, APT. 24, BUILDING B
CLEARWATER, FL 33764

Current Mailing Address:

2030 57TH AVE. N.
ST. PETERSBURG, FL 33714

New Mailing Address:

2207 BELLEAIR RD
CHATEAU BELLEAIR, APT. 24, BUILDING B
CLEARWATER, FL 33764

FEI Number: 59-3667694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGALLS, THANH
529 LILLIAN DR.
MADEIRA BEACH, FL 33706 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DHAMMAWANSHA, BHANTE
Address: 2030 57TH AVE. N.
City-St-Zip: ST. PETERSBURG, FL 33714

Title: D () Delete
Name: ANDERSON, VICTORIA
Address: PO BOX 48273
City-St-Zip: ST. PETERSBURG, FL 33743

Title: D () Delete
Name: INGALLS, THANH
Address: 529 LILLIAN DR.
City-St-Zip: MADEIRA BEACH, FL 33706

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DHAMMAWANSHA, BHANTE
Address: 2207 BELLEAIR RD, CHATEAU BELLEAIR, APT. 24
City-St-Zip: CLEARWATER, FL 33764

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: BONNER, WAYNE L TREASUR
Address: 210 TEMPLE LANE
City-St-Zip: BELLEAIR BLUFFS, FL 33770

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WAYNE L. BONNER

D

07/08/2002

Electronic Signature of Signing Officer or Director

Date