## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000006226

FILED Jan 21, 2005 Secretary of State

Entity Name: DHAMMA WHEEL MEDITATION SOCIETY INC.

**Current Principal Place of Business: New Principal Place of Business:** 2207 BELLEAIR RD CHATEAU BELLEAIR, APT. 24, BUILDING B CLEARWATER, FL 33764 **New Mailing Address: Current 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: Name and Address of New Registered Agent: BONNER, WAYNE L TREASUR 210 TEMPLE LANE BELLEAIR BLUFFS, FL 33770 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DHAMMAWANSHA, BHANTE Name: Name: Address: 2207 BELLEAIR RD, CHATEAU BELLEAIR, APT. 24 Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title: Title: ( ) Delete () Change () Addition ANDERSON, VICTORIA Name: Name: Address: PO BOX 48273 Address: City-St-Zip: ST. PETERSBURG, FL 33743 City-St-Zip: Title: () Delete Title: () Change () Addition INGALLS, THANH Name: Name: Address: 529 LILLIAN DR. Address: City-St-Zip: MADEIRA BEACH, FL 33706 City-St-Zip: Title: ( ) Delete Title: () Change () Addition BONNER, WAYNE L TREASUR Name: Name: Address: 210 TEMPLE LANE Address: City-St-Zip: BELLEAIR BLUFFS, FL 33770 City-St-Zip:

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: BHANTE DHAMMAWANSHA D 01/21/2005