2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006226

Entity Name: DHAMMA WHEEL MEDITATION SOCIETY INC.

Feb 14, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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1518 S. HAVEN DRIVE CLEARWATER, FL 337642755

Current Mailing Address: New Mailing Address:

1518 S. HAVEN DRIVE CLEARWATER, FL 337642755

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

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete DHAMMAWANSHA, BHANTE DHAMMAWANSHA, BHANTE Name: Name:

2207 BELLEAIR RD, CHATEAU BELLEAIR, APT. 24 Address: 1518 S. HAVEN DRIVE Address:

City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: CLEARWATER, FL 337642755

Title: Title: (X) Change () Addition () Delete ANDERSON, VICTORIA Name: CASTELLANO, GINA Name:

Address: PO BOX 48273 Address: 4400 FIRST ST. N. # 205 City-St-Zip: ST. PETERSBURG, FL 33743 City-St-Zip: ST. PETERSBURG, FL 33703

Title: () Delete Title: SEC (X) Change () Addition INGALLS, THANH SHEPIS, ANN Name: Name:

1485 LOMAN COURT Address: 529 LILLIAN DR. Address: City-St-Zip: MADEIRA BEACH, FL 33706 City-St-Zip: PALM HARBOR, FL 34683

Title: () Delete Title: TREA (X) Change () Addition

BONNER, WAYNE L TREASUR Name: Name: BONNER, WAYNE L Address: 210 TEMPLE LANE Address: 210 TEMPLE LANE City-St-Zip: BELLEAIR BLUFFS, FL 33770 City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: Title: () Change (X) Addition

() Delete SMILJANICH, DOROTHY Name: Name: 1820 ALICIA WAY Address: Address: City-St-Zip: City-St-Zip: CLEARWATER, FL 33764

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 **TREA** 02/14/2006