2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 11, 2007
Secretary of State

DOCUMENT# N00000006226

Entity Name: DHAMMA WHEEL MEDITATION SOCIETY INC.

Current Principal Place of Business:

1518 S. HAVEN DRIVE
CLEARWATER, FL 337642755

New Principal Place of Business:

Current Mailing Address:

1518 S. HAVEN DRIVE
CLEARWATER, FL 337642755

New Mailing Address:

FEI Number: 59-3667694 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BONNER, WAYNE L TREASUR
210 TEMPLE LANE
BELLEAIR BLUFFS, FL 33770 US

Name and Address of New Registered Agent:

BRUCE, JOHN D TREASUR
209 ORCHARD GROVE PL
OLDSMAR, FL 34677 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: JOHN D BRUCE 06/11/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: DHAMMAWANSHA, BHANTE
Address: 1518 S. HAVEN DRIVE
City-St-Zip: CLEARWATER, FL 337642755

Title: SEC ( ) Delete
Name: CASTELLANO, GINA
Address: 4400 FIRST ST. N. # 205
City-St-Zip: ST. PETERSBURG, FL 33703

Title: SEC ( ) Delete
Name: SHEPIS, ANN
Address: 1485 LOMAN COURT
City-St-Zip: PALM HARBOR, FL 34683

Title: TREA ( ) Delete
Name: BONNER, WAYNE L
Address: 210 TEMPLE LANE
City-St-Zip: BELLEAIR BLUFFS, FL 33770

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TREA (X) Change ( ) Addition
Name: BRUCE, JOHN D
Address: 209 ORCHARD GROVE PL
City-St-Zip: OLDSMAR, FL 34677

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

I hereby certify that the information supplied with this filing does not qualify 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: JOHN D BRUCE TRES 06/11/2007
Electronic Signature of Signing Officer or Director Date