

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003881

FILED
Jan 10, 2007
Secretary of State

Entity Name: JACKSONVILLE ZEN SANGHA, INC.

Current Principal Place of Business:

2014 PERRY PLACE
JACKSONVILLE, FL 322073445 US

New Principal Place of Business:

Current Mailing Address:

2014 PERRY PLACE
JACKSONVILLE, FL 322073445 US

New Mailing Address:

FEI Number: 59-3222223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TILLEY, E A
8342 COMPASS ROSE DRIVE SOUTH
JACKSONVILLE, FL 322166314 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: TD () Delete
Name: TILLEY, E. A
Address: 8342 COMPASS ROSE DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 322166314 US

Title: PD () Delete
Name: LEWIS, ROBERT E
Address: 2014 PERRY PLACE
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: BASSINGTHWAIGHTE, CLAUDE W
Address: 2223 SAINT JOHNS AVE
City-St-Zip: JACKSONVILLE, FL 322044621 US

Title: D () Delete
Name: KUNDERT, RICHARD L
Address: 11673 BLACKSTONE RIVER RD
City-St-Zip: JACKSONVILLE, FL 322562920 US

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

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: ROBERT E. LEWIS

P

01/10/2007

Electronic Signature of Signing Officer or Director

Date