2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006
Secretary of State

DOCUMENT# N99000003579

Entity Name: KANCHA BUDDHIST CENTER INC.

Current Principal Place of Business:

2016 LOCKWOOD RIDGE ROAD
SARASOTA, FL 34234 US

New Principal Place of Business:

Current Mailing Address:

2016 LOCKWOOD RIDGE ROAD
SARASOTA, FL 34234 US

New Mailing Address:

FEI Number: 65-0944589 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANSEN, WILLIAM H
2016 LOCKWOOD RIDGE ROAD
SARASOTA, FL 34234 US

Name and Address of New Registered Agent:

FERDINAND, RUSSELL
2016 LOCKWOOD RIDGE ROAD
SARASOTA, FL 34234 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: RUSSELL FERDINAND 02/24/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BARRETT, ELIZABETH
Address: 2016 LOCKWOOD RIDGE ROAD
City-St-Zip: SARASOTA, FL 34234

Title: D ( ) Delete
Name: TRACEY, SANDRA
Address: 2016 LOCKWOOD RIDGE ROAD
City-St-Zip: SARASOTA, FL 34234

Title: D ( ) Delete
Name: SINGH, KATHLEEN
Address: 2016 LOCKWOOD RIDGE ROAD
City-St-Zip: SARASOTA, FL 34234

Title: D ( ) Delete
Name: HANSEN, WILLIAM
Address: 2016 LOCKWOOD RIDGE ROAD
City-St-Zip: SARASOTA, FL 34234

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: WILLIAM HANSON D 02/24/2006
Electronic Signature of Signing Officer or Director Date