## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000003579

Entity Name: KANCHA BUDDHIST CENTER INC.

FILED Mar 01, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2137 NORTH TAMIAMI TRAIL SARASOTA, FL 34234 **Current Mailing Address: New Mailing Address:** 2137 NORTH TAMIAMI TRAIL SARASOTA, FL 34234 FEI Number: 65-0944589 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: LEWIS, PAUL W HANSEN, WILLIAM H 2002 CLEMATIS PLACE POST OFFICE BOX 358 SARASOTA, FL 34239 BRADENTON, FL 342060358 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: WILLIAM H. HANSEN 03/01/2003 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete TRUBITZ, SUZI ELIZABETH, BARRETT Name: Name: Address: 5070 GULF OF MEXICO DRIVE Address: 7707 HOLIDAY DRIVE City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: SARASOTA, FL 34231 Title: ( ) Delete Title: () Change () Addition Name: TRACEY, SANDY Name: Address: 5327 MOELLER AVENUE Address: City-St-Zip: SARASOTA, FL 34233 City-St-Zip: Title: () Delete Title: () Change () Addition REMY, HANNAH Name: Name: Address: PO BOX 1215 Address: City-St-Zip: SARASOTA, FL 34236 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: SHANNON, JANE Name: 2002 CLEMATIS PLACE Address: Address: City-St-Zip: SARASOTA, FL 34239 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: ELIZABETH BARRETT D 03/01/2003