2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 26, 2018
Secretary of State
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Entity Name: KADAMPA MEDITATION CENTER FLORIDA, INC.

Current Principal Place of Business:

730 N WASHINGTON BLVD
SARASOTA, FL 34236

Current Mailing Address:

PO BOX 4037
SARASOTA, FL 34230 US

FEI Number: 65-0944589

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KADAMPA MEDITATION CENTER FLORIDA
730 N WASHINGTON BLVD
SARASOTA, FL 34236 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: ANIKA TRANCIK 06/26/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	BOARD MEMBER, GSD
Name	WRIGHT, HEATHER
Address	MANJUSHRI KMC CONISHEAD PRIORY PRIORY ROAD (A5087 COAST ROAD)
City-State-Zip:	ULVERSTON CUMBRIA LA12 9QQ

Title	ADMINISTRATIVE DIRECTOR
Name	TRANCIK, ANIKA DR.
Address	730 N WASHINGTON BLVD
City-State-Zip:	SARASOTA FL 34237

Title	BOARD MEMBER
Name	TRACEY, SANDY SUE
Address	PO BOX 4037
City-State-Zip:	SARASOTA FL 34230

Title	BOARD MEMBER, GEN.SECRETARY OF EDUCATION COUNCIL
Name	COWING, STEVE
Address	MANJUSHRI KMC CONISHEAD PRIORY PRIORY ROAD (A5087 COAST ROAD)
City-State-Zip:	ULVERSTON CUMBRIA LA12 9QQ

Title	BOARD MEMBER
Name	TORIELLO, WILLIAM
Address	730 N WASHINGTON BLVD
City-State-Zip:	SARASOTA FL 34236

I hereby 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 all other like empowered.

SIGNATURE: ANIKA TRANCIK ADMINISTRATIVE DIRECTOR 06/26/2018

Electronic Signature of Signing Officer/Director Detail — Date