2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 23, 2006 8:00 am Secretary of State

DOCUMENT # 768618 1. Entity Name THE VEDANTA CENTER OF ST. PETERSBURG, INC.)2-23-2006	_		
216 19TH A	ce of Business NE., S.E. BURG, FL 33705	216	g Address 19TH AVE., S.E. ETERSBURG, Ft. 3:	3705		:	n sán de la composição de	Lähtä äkäk keä kesä in	II a irka airka e	ları arêli akalı arê	311 0: 0: 100 1
2. Principal F	Place of Business	3. Mai	3. Mailing Address								
Suite, Apt.	. #, etc.	Su	Suite, Apt. #, etc.				02122006 _C	hg-NP	CR2E	37 (11/05)	
City & Stat	te	Cit	ty & State				4. FEI Number 59-280875	50			oplied For ot Applicable
Zip	Country	Ziç)	Coun	itry		5. Certificate of S	tatus Desired		\$8.75 Add Fee Require	
	6. Name and Address of Curre	nt Registere	ed Agent				7. Name and Add	iress of New F	Registered	Agent	
POMONITI	LEAN				Name						
	I, JEAN JND PLACE S. TERSBURG, FL 33712				Street Add	dress (F	P.O. Box Number is	Not Acceptabl	e)		
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					City				FI	- 1	
	named entity submits this statement	for the purp	ose of changing its	registered	d office or r	register	ed agent, or both, in	the State of FI	orida. I am	familiar with.	and accept
12 22 7	tions of registered agent.										•
	2 3										
SIGNATURE	97.43										
J. 300 107	Signature, typed or printing name of registered ago	ant and title # app	olicable. (NOTE	: Registered A	Agent signature	re required	when reinstating)		DATE		·······
7 20 2		ant and title # app	·					1 .			
	Signature, typed or draw name of registered agr Filling Feet 1881.25 Due by May 1, 2006	ant and title if app	9. Election Carr Trust Fund C	paign Fin	ancing _		\$5.00 May Be Added to Fees		lake ched	ck payable to	
10.	Filing Fee 19 \$81.25		9. Election Carr	paign Fin	ancing _		\$5.00 May Be	Flo	lake ched	rtment of Si	tate
10.	Filing Fee 1, \$61.25 Due by May 1, 2006 OFFICERS AND I		9. Election Carr	npaign Fin contribution 11.	ancing _		\$5.00 May Be Added to Fees	Flo	lake ched	rtment of Si	tate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	Lean B. Bomonte Jean B	Bomonti	2-14-06 866-8360	
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #	
V				