

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001601

FILED
Jan 17, 2006
Secretary of State

Entity Name: MAHARISHI WORLD PEACE VEDIC ORGANICS, INC.

Current Principal Place of Business:

1973 GRAND DRIVE
MAHARISHI VEDIC CITY, IA 52556

New Principal Place of Business:

2000 CAPITAL BLVD
MAHARISHI VEDIC CITY, IA 52556

Current Mailing Address:

1973 GRAND DRIVE
MAHARISHI VEDIC CITY, IA 52556

New Mailing Address:

2000 CAPITAL BLVD
MAHARISHI VEDIC CITY, IA 52556

FEI Number: 42-1523130

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POTTS, ALCINE
1125 SW 2ND AVENUE
GAINESVILLE, FL 32601 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: WYNNE, ROBERT G
Address: 1973 GRAND DRIVE
City-St-Zip: MAHARISHI VEDIC CITY, IA 52556

Title: D () Delete
Name: MORRIS, BEVAN
Address: 1900 CAPITAL BLVD.
City-St-Zip: MAHARISHI VEDIC CITY, IA 52556

Title: D () Delete
Name: POTTER, PAUL
Address: 1900 CAPITAL BLVD.
City-St-Zip: MAHARISHI VEDIC CITY, IA 52556

Title: S () Delete
Name: BEACH, PETER T
Address: 911 ALTURAS WAY
City-St-Zip: MILL VALLEY, CA 94941

Title: T () Delete
Name: ZIMMERMAN, CARL
Address: 1736 JOY AVENUE
City-St-Zip: MAHARISHI VEDIC CITY, IA 52556

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAN HARVEY

ASST

01/17/2006

Electronic Signature of Signing Officer or Director

Date