

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001601

FILED
Jul 14, 2008
Secretary of State

Entity Name: MAHARISHI WORLD PEACE VEDIC ORGANICS, INC.

Current Principal Place of Business:

2000 CAPITAL BLVD
MAHARISHI VEDIC CITY, IA 52556

New Principal Place of Business:

Current Mailing Address:

2000 CAPITAL BLVD
MAHARISHI VEDIC CITY, IA 52556

New Mailing Address:

FEI Number: 42-1523130 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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

Electronic Signature of Registered Agent

Date

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 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: JAN HARVEY

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07/14/2008

Electronic Signature of Signing Officer or Director

Date