## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000002790

Apr 30, 2006 Secretary of State

Entity Name: TAMPA BAY KARMA THEGSUM CHOLING, INC.

Current Principal Place of Business: New Principal Place of Business:

13515 LAKE MAGDALENE BLVD. TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

PO BOX 10186 TAMPA, FL 336791018

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HALL, CRALLE H 13515 LAKE MAGDALENE BLVD. TAMPA, FL 33618 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D ()Delete Title: D (X)Change ()Addition

Name: HALL, CRALLE H
Address: 13515 LAKE MAGDALENE BLVD.
Name: CROCKETT, PETER
Address: PO BOX 2783

City-St-Zip: TAMPA, FL 33618 City-St-Zip: ST. PETERSBURG, FL 33731

Title: D ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 ROBERT, MATUSKY M
 Name:
 ROBERT, MATUSKY M

 Address:
 PO BOX 1607
 Address:
 PO BOX 1607

City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: LAND O LAKES, FL 34639

 Name:
 CROCKETT, PETER
 Name:
 GRABAU, DAVID DR.

 Address:
 2550 67 AVE S
 Address:
 7806 LEMONWOOD CT.

City-St-Zip: SAINT PETERSBURG, FL 33712 City-St-Zip: TAMPA, FL 33637

Title: S () Delete Title: S (X) Change () Addition

 Name:
 BRITTON, DEBBIE
 Name:
 GWEN, HANNER

 Address:
 625 ONTARIO AVE
 Address:
 5701 N FLORIDA AVE

 City-St-Zip:
 TAMPA, FL 33606
 City-St-Zip:
 TAMPA, FL 33604

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

SIGNATURE: ROBERT MATUSKY T 04/30/2006