

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007878

FILED
Aug 29, 2005
Secretary of State

Entity Name: AYUR VEDIC HEALINGS, INC.

Current Principal Place of Business:

2017 FIESTA DR
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

2017 FIESTA DR
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 54-2099433 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:

MILLER, BRYAN
1254 SEA PLUME WAY
SARASOTA, FL 34242 US

Name and Address of New Registered Agent:

MILLER, BRYAN
2017 FIESTA DRIVE
SARASOTA, FL 34231 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: BRYAN MILLER

08/29/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILLER, BRYAN A
Address: 1254 SEA PLUMBER WAY
City-St-Zip: SARASOTA, FL 34242

Title: D () Delete
Name: MILLER, Z. LIGHT
Address: 1254 SEA PLUMBER WAY
City-St-Zip: SARASOTA, FL 34242

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MILLER, BRYAN A
Address: 2017 FIESTA DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: D (X) Change () Addition
Name: MILLER, Z. LIGHT
Address: 2017 FIESTA DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: D () Change (X) Addition
Name: MILLER, JULIA B
Address: 4341 WOODVIEW DRIVE
City-St-Zip: SARASOTA, FL 34234

Title: D () Change (X) Addition
Name: ST GEORGE, RICK
Address: 692 OAKS CREEK COURT
City-St-Zip: OSPREY, FL 34229

Title: D () Change (X) Addition
Name: KARP, SUSAN
Address: 2017 FIESTA DRIVE
City-St-Zip: SARASOTA, FL 34231

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRYAN A. MILLER

D

08/29/2005

Electronic Signature of Signing Officer or Director

Date