

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007878

FILED
Jun 22, 2006
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:

4926 BUCHANAN PLACE
SARASOTA, FL 34231

Current Mailing Address:

2017 FIESTA DR
SARASOTA, FL 34231

New Mailing Address:

4926 BUCHANAN PLACE
SARASOTA, FL 34231

FEI Number: 54-2099433 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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
2017 FIESTA DRIVE
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

MILLER, BRYAN
4926 BUCHANAN PLACE
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

06/22/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MILLER, BRYAN A
Address: 4926 BUCHANAN PLACE
City-St-Zip: SARASOTA, FL 34231

Title: D (X) Change () Addition
Name: MILLER, Z. LIGHT
Address: 4926 BUCHANAN PLACE
City-St-Zip: SARASOTA, FL 34231

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

SIGNATURE: BRYAN MILLER

D

06/22/2006

Electronic Signature of Signing Officer or Director

Date