

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 07, 2007
Secretary of State**

DOCUMENT# N02000000649

Entity Name: BODHIMANDAING DHAMMA CENTER, INC.

Current Principal Place of Business:

3107 OHIO AVE
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

3107 OHIO AVE
SANFORD, FL 32773

New Mailing Address:

FEI Number: 75-2984329 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:

TAYZAWBATHA, U
3107 OHIO AVE
SANFORD, FL 32773 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: TAYZAWBATHA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TAYZAWBATHA, U
Address: 3107 OHIO AVE
City-St-Zip: SANFORD, FL 32773

Title: V () Delete
Name: THONDARA, THOMAS
Address: 710 GRANDVIEW LANE
City-St-Zip: LA PUENTE, CA 91744

Title: D () Delete
Name: NYO, HAN
Address: 1112 W. 159 STREET
City-St-Zip: GARDENA, CA 90224

Title: D () Delete
Name: THAN, THAN
Address: 2121 HARLEQUIN TERRACE
City-St-Zip: SILVER SPRING, MD 20904

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:

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: TAYZAWBATHA

Electronic Signature of Signing Officer or Director

P

10/07/2007

Date