2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400005095

STILES, MICHAEL P

2825 NE 21ST AVE.

FT. LAUDERDALE, FL 33306

Name:

Address:

City-St-Zip:

FILED May 05, 2005 Secretary of State

Entity Name: DROLMA BUDDHIST CENTER, INC.				
Current Principal Place of Business:		New Principal Place of Business:		
2946 SOUTH UNIVERSITY DR., #7210 DAVIE, FL 33328		2403 N DIXIE HWY. FORT LAUDERDALE, FL 33305		
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
2946 SOUTH UNIVERSITY DR., #7210 DAVIE, FL 33328		2403 N DIXIE HWY. FORT LAUDERDALE, FL 33305		
	e with s. 607.193(2)(b), F.S., the corporation did not receive	•	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of	of New Registered Agent:	
DE LA CRUZ, JOHN 8401 SW 107TH AVE. #168E MIAMI, FL 33173 US		2403 N DIXÎE HWY	SEYMOUR, DANIEL J AD 2403 N DIXIE HWY FORT LAUDERDALE, FL 33305 US	
The above in the State	named entity submits this statement for the purpose of Florida.	e of changing its registere	d office or registered agent, or both,	
SIGNATURE: DANIEL J. SEYMOUR			05/05/2005	
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () Delete DE LA CRUZ, DIANNE 8401 SW 107TH AVE., #168E MIAMI, FL 33173	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete MCLEAN, WILLIAM 1785 N. ANDREWS SQUARE #306 FT. LAUDERDALE, FL 33311	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete SCHNEIDER, JACK H 8773 NW 27TH ST. CORAL SPRINGS, FL 33065	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DANIEL J SEYMOUR 05/05/2005 AD