2007 NOT-FOR-PROFIT CORPORATION

Apr 23, 2007 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # N06000002195** 04-23-2007 90090 049 ****61.25 NAGARJUNA TANTRIC BUDDHIST CENTER, INC. 40010--Principal Place of Business Mailing Address 1371 FAYETTEVILLE DR. 1371 FAYETTEVILLE DR. SPRINGHILL, FL 34609 SPRINGHILL, FL 34609 3. Mailing Address P.Q.Box 1495 2. Principal Place of Business - No P.O. Box # 13105 Peregrin Circle Suite, Apt. #, etc. Suite, Apt. #, etc. 04172007 Chg-NP CR2E037 (12/06) Sity & State Draden ton Sarasota, 434230 Applied For 4. FEI Number ۲ 20-439361 Not Applicable 34212 Country Wanatee Country \$8.75 Additional 5. Certificate of Status Desired 34212 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MCMAHON, RUTH E 1990 MAIN ST., SUITE 700 Street Address (P.O. Box Number is Not Acceptable) SARASOTA, FL 34236 Zip Code City 8. 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. I am familiar with, and accept SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee Is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Due by May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. VP - D D Delete Addition TITLE ☐ Change TITLE timothy Knight Point - Suite 210 MARCHESE, STEPHEN NAME NAME STREET ADDRESS STREET ADDRESS 1371 FAYETTEVILLE DR. 34231 Sarasota, F CITY-ST-ZIP SPRINGHILL, FL 34609 CITY-ST-ZIP Detete ☐ Change Addition TITLE TITLE Norman Marchard D.O. 130x 15813-1814 Worrington MARCHESE, MARY KUKA NAME NAME 1371 FAYETTEVILLE DR. STREET ADDRESS STREET ADDRESS Sarasota, FL 34231 CITY-ST-7IP SPRINGHILL, FL 34609 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE Patricia Staebler MCMAHON, RUTH NAME 409 Petrel trail 13105 PEREGRN CIRCLE STREET ADDRESS STREET ADDRESS BRADENTON, FL 34212 Bradenton, 15-34212 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE P-0-T Change Addition Roth McMahon Circle 13105 Peregnin Circle 13 radenton. FL 34212 MAME NAME STREET ADDRESS STREET ADDRESS FL 34212 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 941-366-0115

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: