2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2004
Secretary of State

DOCUMENT# N32497

Entity Name: BODHI TREE DHAMMA CENTER, INC.

Current Principal Place of Business:

11355 DAUPHIN AVE.
LARGO, FL 33778

New Principal Place of Business:

Current Mailing Address:

11355 DAUPHIN AVE.
LARGO, FL 33778

New Mailing Address:

FEI Number: 59-2957338 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMERON, JAMES S
11355 DAUPHIN AVE
LARGO, FL 33778 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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: STD ( ) Delete
Name: CAMERON, JIM
Address: 11355 DAUPHIN AVENUE
City-St-Zip: LARGO, FL

Title: DVP ( ) Delete
Name: WOOD, DOUGLAS
Address: 2369 HIDDEN LAKE DR.
City-St-Zip: PALM HARBOUR, FL

Title: D ( ) Delete
Name: HOLLISTER, JANE
Address: 10941 N BLVD
City-St-Zip: TAMPA, FL 33612

Title: PD ( ) Delete
Name: HARDIN, KENNETH
Address: 4531 W ROSEMERE
City-St-Zip: TAMPA, FL 33609

Title: D ( ) Delete
Name: DAVIDOWICZ, TOM
Address: 5305 9TH AV S
City-St-Zip: GULFPORT, FL

Title: D ( ) Delete
Name: LONGFELLOW, DON
Address: 6330 EMERSON AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL

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:

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 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: JAMES S CAMERON SECT 05/07/2004

Electronic Signature of Signing Officer or Director Date