## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44704

FILED Feb 08, 2006 Secretary of State

Entity Name: DZOGCHEN BUDDHIST SOCIETY OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

3111 N TAMPA ST TAMPA, FL 33603

Current Mailing Address: New Mailing Address:

2917 W COACHMAN AVE P.O. BOX 374

TAMPA, FL 33611 TAMPA, FL 33601 US

FEI Number: 59-3089107 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HALE, CHRISTINE
2917 W. COACHMAN AVE.
TAMPA, FL 33611 US

HALE, CHRISTINE
2002 S. HABANA AVE. #B
TAMPA, FL 33629 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: CHRISTINE HALE 02/08/2006

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ()Delete Title: ()Change()Addition

 Name:
 KAZI, TSEDE,
 Name:

 Address:
 3111 N. TAMPA ST
 Address:

 City-St-Zip:
 TAMPA, FL 33603
 City-St-Zip:

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MCINTYRE, RICHARD
 Name:

 Address:
 101 E KENNEDY BLVD, STE 2700
 Address:

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition

 Name:
 HALE, CHRISTINE
 Name:
 HALE, CHRISTINE

 Address:
 2917 W COACHMAN AVE
 Address:
 2002 S. HABANA AVE. #B

 City-St-Zip:
 TAMPA, FL 33611
 City-St-Zip:
 TAMPA, FL 33629

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: CHRISTINE HALE TD 02/08/2006