FILE NOW: FILING FEE IS \$61.25

NONPROFIT COMPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

1. Corporation Name

N97000000641 (7)

RATNASHRI TIRETAN RUDDHIST MEDITATION CENTER IN

FILED Feb 10 1998 8:00am Secretary of State

C.				A IRANIAN ANA JAWA NAKA BAWA BAWA BAWA BAWA BAWA BAWA BAWA B	
Principal Plac	e of Business	Mailing Address		I TODALIKET DID HANN HODIT BONN BANN DENN DENN DENN DENN DENN DENN DENN D	IZAN ODANO BAKA BIEZA AKDI (EDI
607 GARLAND CIRCLE 60 INDIAN ROCKS BEACH FL 33785 IN		607 GARLAND CIRCLE INDIAN ROCKS BEACH FL 3	3785	3. Date Incorporated or Qualified 02/03/1997	
	H:shland			4. FEI Number 31 - 1515267	Applied For Not Applicable
21 1916	No Highland	28 1100 Clerck	and St.	6. Certificate of Status Desired	\$8.75 Additional Fee Required
Sulte, Apt.	#. etc. nvL	Suite, Apt. #, etc. 27 5 4 8	39	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & Stat	a mater Ph	28 Clearnates A		7. Is this nonprofit corporation a homeowners association?	
Zip 24 337	55 Country C	Zip 33755 3	Country 0 USA	This corporation owes or has paid the cu Personal Property Tax due June 30.	irrent year Intangible Ves No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
81 Name					
607 GARLAND CIRCLE			82 Street A	Street Address (P.O. Box Number is Not Acceptable)	
			83		
IIIDINI	NOONS BEACH FE 55765				
			84 City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE					
	Signature, typed or printed name of registered agent		Registered Agent signature		D DIOCOTORO III 40
12. TITLE	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME			1.2 NAME	James P. Hoyes 607 G	
STREET ADDRESS			1.3 STREET ADDRESS	Circle Imbian Ruch	
CITY-ST-ZIP	_		1.4 CITY-ST-ZIP	FG 35785	
TITLE		☐ DELETE	2.1 TITLE	V D La Dalahass a	☐ Change ☐ Addition
NAME			2.2 NAME	Michael C. Kerencess	5463
STREET ADDRESS			2.3 STREET ADDRESS	Richter Street Pa	in Houses
CITY-ST-ZIP TITLE		DELETÉ	2. 4 CITY - ST - ZIP 3.1 TITLE	JEL, 34673	Change Addition
NAME		_ occur	3.2 NAME	durithic S. Churcheron	17330
STREET ADDRESS			3.3 STREET ADDRESS	Sharmand Street Ch	ecrucates
CITY-ST-ZIP			3.4. CITY-ST-ZIP	FL 33755	
TITLE		☐ DELETE	4.1 TITLE	0	Change Addition
NAME			4. 2 NAME	Juck E. Churchward	1730
STREET ADDRESS			4.3 STREET ADDRESS		leameter
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Fh 33755	
TITLE		☐ DELETE	5.1 TITLE	512	☐ Change ☐ Addition
NAME			5.2 NAME	Cinty Parker 1730 56 Clearwester th 3575	enceral St.
STREET ADDRESS			5.3 STREET ADDRESS	Clearwater FL 3575	5 N/A
CITY-ST-ZIP		Delete	5.4 City-St-ZiP		Change Addition
TITLE	İ	☐ DELETE	6.1 TITLE		Change Addition
NAME CTREET APPROCES			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for t	6.4 CITY-ST-ZIP	d in Section 119.07(3)(i). Florida Statutes, I further c	ertify that the information

indicated on this annual report or supplied with this nimb does not quality for the exemption stated in Section 1.19.07 (3)(), Florida Statutes. Turther certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attackment with an address.