


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 28, 2007 8:00 am
Secretary of State

03-08-2007 90021 023 ****61.25

| | |
|--|---|
| DOCUMENT # N98000005454 |  |
| 1. Entity Name PALYUL CHANGCHUB CHOLING, INC. | |

| | |
|--|--|
| Principal Place of Business 913 GULF BREEZE PARKWAY, SUITE 25 GULF BREEZE, FL 32561 14 Live oak st. Suite C1 | Mailing Address 913 GULF BREEZE PARKWAY, SUITE 25 GULF BREEZE, FL 32561 14 Live oak st. Suite C1 |
|--|--|

66019913



01112007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

| | |
|---|--------------------------------|
| 4. FEI Number 60-3550737 75-32267567 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

| |
|---|
| 6. Name and Address of Current Registered Agent ROOS, JELLE 5448 SOUNDSIDE DR. GULF BREEZE, FL 32563 |
|---|

**DO NOT WRITE
IN THIS SPACE**

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 the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reissuing) DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DIR: Jacquelyn MEYER LAURA DALE ROOS 1200 TAMARA DRIVE 5448 SOUNDSIDE DR. PENSACOLA FL 32504 GULF Breeze 32563 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TREA SLOAN, BETH Mary Elizabeth 1413 ARIOLA PENSACOLA BEACH, FL 32561 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PRES ROOS, JELLE 5448 SOUNDSIDE DRIVE GULF BREEZE, FL 32563 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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: M. Sloan 6/23/07 850-934-4984
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

ATTACHMENT 66019913**Division of Corporations****Annual Report**

Please review the filing for accuracy and the fee to file. If you need to make corrections, use your browser 'BACK' button, make the necessary changes and use the 'CONTINUE' button again. The filing information will be updated exactly as you have entered it. Once you have submitted the information, your filing cannot be updated, removed cancelled or refunded.

| | |
|---|--------------------------------|
| Document Number | N9800000545 |
| Business Entity Name | PALYUL CHANGCHUB CHOLING, INC. |
| FEI Number | 593550727 75-3226756 |
| FEI Number Status | |
| Certificate of Status Desired | No |
| Election Campaign Financing Trust Fund Contribution | No |

Principal Place of Business

| | |
|---------------------|-----------------|
| Address | 14 LIVE OAK ST |
| Suite, Apt. #, etc. | SUITE C1 |
| City, State | GULF BREEZE, FL |
| Zip Code & Country | 32561 |

Mailing Address

| | |
|---------------------|-----------------|
| Address | 14 LIVE OAK ST |
| Suite, Apt. #, etc. | SUITE C1 |
| City, State | GULF BREEZE, FL |
| Zip Code & Country | 32561 |

Name and Address of Registered Agent

| | |
|-----------------------------------|--------------------|
| Name (Last, First, Middle, Title) | ROOS, JELLE |
| Address | 5448 SOUNDSIDE DR. |
| Suite, Apt. #, etc. | |
| City, State | GULF BREEZE, FL |
| Zip Code & Country | 32563 US |
| Registered Agent Signature | JELLE ROOS |

Officer/Director Name and Address

| | |
|-----------------------------------|-------------------|
| Title | SECT |
| Name (Last, First, Middle, Title) | ROOS, JACQUELYN |
| Street Address | 5448 SOUNDSIDE DR |

ATTACHMENT

City, State GULF BREEZE, FL
Zip Code & Country 32563

Title TREA
Name (Last, First, Middle, Title) SLOAN, MARY ELIZABETH
Street Address 1413 ARIOLA
City, State PENSACOLA BEACH, FL
Zip Code & Country 32561

Title TREA
Officer/Director Signature MARY ELIZABETH SLOAN

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66019913 -
Palyul Changchub Choling, Inc
14 Live Oak Street - Suite C1
Gulf Breeze, FL 32561

Feb. 27, 2007

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 8700
Tallahassee, FL 32314

RE: Annual Report Notice
Document number: N98000005454

To whom it may concern:

This informs you that our EIN has CHANGED TO **75-3226756** from 59-3550727. I tried to make this change and file electronically, but could not. There are several changes that need to be made, please note the highlighted areas on the enclosed form.

Thank you for your assistance.

Sincerely,



Mary Elizabeth Sloan

ATTACHMENT

66019913

Palyul Changchub Choling
14 Live Oak St Suite C-1
Gulf Breeze, FL 32561

June 25, 2007

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 8700
Tallahassee, FL 32314

RE: Annual Report Notice
Document number: N98000005454

To Whom It May Concern:

I am returning the copy of the annual report form you sent for signature.

I'm sorry for the delayed response. We moved in March and I did not receive your correspondence until June 23, 2007. Our previous landlord had misplaced it and did not deliver this to me until then.

Sincerely,



Mary Elizabeth Sloan