2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State
04-26-2004 91035 037 ****70.00

DOCUMENT # 759784

1. Entity Name
LAOTIAN AMERICAN ASSOCIATION OF FLORIDA, INC.

Principal Place of Business	Mailing Address
14977 56 ST N CLEARWATER, FL 33760 US	14977 56 ST N CLEARWATER, FL 33760 US

04232004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2891844 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TAI, JOSEPH E 14977 56 ST N CLEARWATER, FL 33760	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ 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
Due by May 1, 2004

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TAI, JOSEPH E 14977 56 ST N CLEARWATER, FL 33760	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SAYASANE, SAVANG 9920 53 LANE N PINELLAS PARK, FL 33782	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD INSOUTA, KHAMPHANH 5255 101ST AVE NORTH PINELLAS PARK, FL 33782	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PHASAVATH, SANTI 5010 8 AVE N SAINT PETERSBURG, FL 33710	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PHOUTHAVONG, MARK 8426 LANTANA DR LARGO, FL 33777	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PHOTHISENE, DAVID 3708 53 AVE N ST. PETERSBURG, FL 33714	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T VORASARN, BOUNNA 2351 34 AVE N SAINT PETERSBURG, FL 33713	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PHOUTHAVONG, MARK 8426 LANTANA DR. LARGO, FL 33777	☐ Change ☑ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Joseph Tai 4/24/04 (727) 538-0688
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #