

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007815

FILED  
Mar 18, 2009  
Secretary of State

Entity Name: QUAN AM BUDDHIST TEMPLE, INC.

**Current Principal Place of Business:**

8102 N FREMONT AVE  
TAMPA, FL 33604

**New Principal Place of Business:**

**Current Mailing Address:**

8102 N FREMONT AVE  
TAMPA, FL 33604

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

DANG, TIET T  
8102 N FREMONT AVE  
TAMPA, FL 33604 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: PD ( ) Delete  
Name: NGUYEN, QUANG  
Address: 8102 N FREMONT AVE  
City-St-Zip: TAMPA, FL 33604

Title: VP ( ) Delete  
Name: HUYNH, DUC M  
Address: 15405 MONTILLA LOOP  
City-St-Zip: TAMPA, FL 33625 US

Title: S ( ) Delete  
Name: PARKER, HONG A  
Address: 13215 TIFTON DR  
City-St-Zip: TAMPA, FL 33618 US

Title: CO-T ( ) Delete  
Name: NGO, TUAN T  
Address: 4509 HIDDEN SADOW DR  
City-St-Zip: TAMPA, FL 33614

Title: CO-T ( ) Delete  
Name: NGUYEN, NHAN V D  
Address: 15405 MONTILLA LOOP  
City-St-Zip: TAMPA, FL 33625

Title: D ( ) Delete  
Name: VO, TAN D  
Address: 848 MANHATTAN BLVD  
City-St-Zip: HARVEY, LA 70058

**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 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: HONG A PARKER

S

03/18/2009

Electronic Signature of Signing Officer or Director

Date