2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008871

FILED Jul 06, 2007 Secretary of State

Entity Name: GULF COAST CHINESE AMERICAN ASSOCIATION, INC.

New Principal Place of Business: Current Principal Place of Business: 1109 MILLPOND CT OSPREY, FL 342298863 **Current Mailing Address: New Mailing Address:** 1109 MILLPOND CT OSPREY, FL 342298863 FEI Number: 65-1257591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LIN, EDWARD 1109 MILLPOND CT OSPREY, FL 342298863 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition CHEN HAMMOND DR LIN, EDWARD DR Name: Name: Address: 6415 JACKIE LYNN CT Address: 1109 MILLPOND CT City-St-Zip: SARASOTA, FL 342419280 City-St-Zip: OSPREY, FL 34229 US (X) Change () Addition Title: () Delete Title: LIN, EDWARD DR Name: Name: ZHANG, XUEJI DR Address: 1109 MILLPOND CT Address: 4860 SABAL LAKES CIRCLE City-St-Zip: OSPREY, FL 342298863 City-St-Zip: SARASOTA, FL 34238 US Title: () Delete Title: () Change () Addition POLLAK, HELEN W Name: Name: 6622 TAEDA DR Address: Address: City-St-Zip: SARASOTA, FL 342419146 City-St-Zip: Title: () Delete Title: () Change () Addition CAO, NANCY Name: Name: 3839 BELLEWATER BLVD Address: Address: City-St-Zip: RIVERVIEW, FL 33569 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: FEIFEI CAO Т 07/06/2007