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May 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N37409 (2)
1. Corporation Name
REPUBLIC OF VIETNAM AIR FORCE VETERAN'S ASSOCIATION, CORP. OF CENTRAL FLORIDA



Principal Place of Business 323 EDEN TRAIL LAKE MARY FL 32746 US	Mailing Address 323 EDEN TRAIL LAKE MARY FL 32746-3856 US
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3. Date Incorporated or Qualified 03/15/1990	3a. Date of Last Report 07/01/1996
4. FEI Number 59-3046194	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 626 MARNI DRIVE 22 City & State WINTER SPRINGS 23 Zip 32708	2a. Mailing Address 26 Suite, Apt. #, etc. 626 MARNI DRIVE 27 City & State WINTER SPRINGS 28 Zip 32708	24 Country U.S.A.	25 Country U.S.A.	29 Country U.S.A.	30 Country U.S.A.
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9. Name and Address of Current Registered Agent
**MANH NGUYEN, VAN
626 MARNI DR
WINTER SPRINGS FL 32708**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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: Manh Nguyen **NGUYEN, MANH V** DATE: **5/1/97**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	HUE DINH	
STREET ADDRESS	323 EDEN TRAIL	
CITY-ST-ZIP	LAKE MARY FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	PHONG LEH	
STREET ADDRESS	33120 LAKE SHORE DR	
CITY-ST-ZIP	TAVARES FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	VINH DAO O	
STREET ADDRESS	3408 CIRQUE CIRCLE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	NGUYEN, PHUOC C	
STREET ADDRESS	7947 WINTER SONG DRIVE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	HO, NHON VAN	
STREET ADDRESS	4233 CAROUSEL RD	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	NGUYEN, MANH VAN	
STREET ADDRESS	626 MARNI DR.	
CITY-ST-ZIP	WINTER SPRINGS FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 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 attachment with an address.

SIGNATURE: Manh Nguyen **MANH VAN NGUYEN** DATE: **5/1/97** 407 327 4640
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0013952

CR2E037 (9/96)