2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **N9700000799**

1. Entity Name

GAINESVILLE CHINESE CHRISTIAN CHURCH, INC.



FILED Apr 10, 2003 8:00 am Secretary of State 04-10-2003 90093 010 ****61.25

						(VIE)							
Principal Place of Business 2850 NW 23 BLVD GAINESVILLE FL 32605 US				Mailing Address 2850 NW 23 BLVD GAINESVILLE FL 32605 US				 - 	NE JESTA ERNA ÁRAJA	êzili êêlil ê	8 711 88 18 18	BIL O (0) (1 00)	
2. Principal Place of Business				3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES						
City & State				ity & State			4. FEI Number 59-2633320		———	Applied For Not Applicable			
Zip Country				ip	intry						.75 Additional Required		
6. Name and Address of Current Registered Agent								7. Name and Addr	ress of New R	egistered	Agent		1
						Name		-]
TU, CHINGKANG 1108 SW 82 TERR					₹7.5	Street Address (P.O. Box Number is Not Acceptable)							
GAINESV	/ILLE FL 326	107				City					Zip Cod	<u> </u>	-
										FL	•		
	e named entity tions of registe	submits this statement for	r the pur	oose of changing its	registere	ed office or reg	gistere	ed agent, or both, in t	he State of Flo	rida. I am	familiar with,	and accept	
the obligat	tions of registe	ered agent.											
0.0		No. of											
SIGNATURE.	Signature, typed o	or printed name of registered agent	and title if ap	plicable. (NOTE	: Registered	Agent signature re	equired	when reinstating)		DATE			
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FILE NOW: FEE IS \$61.25 9. Election of Trust Fun						~ —		\$5.00 May Be Added to Fees			k Payable tment of S		
10. OFFICERS AND DIRECTORS					11.			ADDITIONS/CHANGE	I 10	1			
TITLE	D Delete				TITLE					•	☐ Change	☐ Addition	18
NAME	CHEN, PAI	JL			NAME	<u>:</u>							3
STREET ADDRESS	1325 N.W. 53RD TERRACE				STRE	ET ADDRESS							3
CITY-ST-ZIP	GAINESVIL	LE FL 32605			CITY	-ST-ZIP							֓֞֝֝׆֓֡֡֝֡֡֡֡֡֝֡֡֡֡֡֡֝֡֡֡֡֡֝֡֡֡֡֡֡֝֡֡֡֝֡֡֡
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NAME 🎨	HSIEH, SH				NAM	:							1
STREET ADDRESS		25TH AVENUE				ET ADDRESS							1
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TITLE	D MANO			☐ Delete							Change	Addition]
NAME	TIA, MANG				NAM								l
STREET ADDRESS CITY-ST-ZIP	8214 NW 63 BLVD GAINESVILLE FL 32653				4	ET ADDRESS ST-ZIP							l
	8				-1						☐ Change	☐ Addition	}
TITLE NAME	D				TITLE						∟ Unange	Addition	
STREET ADDRESS	l colo and as many					ET ADDRESS							
CITY-ST-ZIP	GAINESVILLE FL 32607					ST-ZIP							ĺ
TITLE	D	·		☐ Delete	TITLE			•			☐ Change	☐ Addition	1
NAME	CHOU, IVA	N		EL DOIGIO	NAME							<u> </u>	
STREET ADDRESS	4126 NW 6	6TH TERR			STREE	ET ADDRESS							
CITY-ST-ZIP	GAINESVIL	LE FL 32606			CITY-	ST-ZIP							
TITLE	D	_		☐ Delete	TITLE						☐ Change	☐ Addition	
NAME	YEN, ALICE				NAME								
STREET ADDRESS	3300 NW 2					ET ADDRESS							
CITY-ST-ZIP	GAINESVIL	LE FL 32605			CITY-	ST-ZIP							

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: