

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000005925

Entity Name: PHO CHIEU BUDDHIST CENTER, INC./CHUA PHO CHIEU**Current Principal Place of Business:**3898 CINDY LANE
LAKE WORTH, FL 33467**Current Mailing Address:**3898 CINDY LANE
LAKE WORTH, FL 33467 US**FEI Number:** 45-5298917**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TRUONG, NGUYEN M
3898 CINDY LANE
LAKE WORTH, FL 33467 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**Officer/Director Detail :**

Title	PD
Name	TRUONG, NGUYEN M
Address	3898 CINDY LANE
City-State-Zip:	LAKE WORTH FL 33467

Title	SD
Name	TRAN, TU
Address	3898 CINDY LANE
City-State-Zip:	LAKE WORTH FL 33467

Title	D
Name	HUYNH, CHINH
Address	318 SOUTH B STREET
City-State-Zip:	LAKE WORTH FL 33460

Title	VPD
Name	NGUYEN, TRUC PHAN
Address	410 WILMA CIR, UNIT 302
City-State-Zip:	WEST PALM BEACH FL 33404

Title	TD
Name	LAM, CAM TU
Address	10295 BOCA BEND WEST
City-State-Zip:	BOCA RATON FL 33428

Title	D
Name	TRUONG, MAGGIE D
Address	11211 LAUREL WALK ROAD
City-State-Zip:	WELLINGTON FL 33449

I hereby 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 all other like empowered.

SIGNATURE: NGUYEN TRUONG

P

04/26/2014

Electronic Signature of Signing Officer/Director Detail_____
Date