

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 am
Secretary of State

01-16-2002 90044 021 ****61.25

DOCUMENT # 760842

1. Entity Name

VIETNAMESE ALLIANCE CHURCH, INC.

Principal Place of Business

Mailing Address

514 CHARLOTTE ROAD
 AUBURNDALE FL 33823

514 CHARLOTTE ROAD
 AUBURNDALE FL 33823

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2362157

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUYNH, HUNG JOHN
5788 STATE ROAD 542 W
WINTER HAVEN FL 33823

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PD
 NAME: HUYNH, HUNG JOHN Delete
 STREET ADDRESS: 501 HOLT CR
 CITY-ST-ZIP: WINTER HAVEN FL 33880

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: VSD
 NAME: NGUYEN, DIEN K Delete
 STREET ADDRESS: 304 LIVE OAK LANE S W
 CITY-ST-ZIP: WINTER HAVEN FL

TITLE: VSD Change Addition
 NAME: HUONG N LEBANOFF Change Addition
 STREET ADDRESS: 325 SANDPINE TRL
 CITY-ST-ZIP: Winter Haven, FL. 32880

TITLE: TD
 NAME: DOAN, LAN Delete
 STREET ADDRESS: 3820 OCITA DRIVE
 CITY-ST-ZIP: ORLANDO FL 32837

TITLE: TD Change Addition
 NAME: DOAN, NGOC Change Addition
 STREET ADDRESS: 3820 Ocita Dr.
 CITY-ST-ZIP: Orlando, FL. 32837

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Change Addition
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TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

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: *Doan*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOAN NGOC

Jan. 08. 02

407-438-1299

Date

Daytime Phone #

CR2E037 (9/01)