2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765279

FILED Apr 22, 2007 Secretary of State

Entity Name: THE SUNCOAST ASSOCIATION OF CHINESE AMERICANS, INC.

Current Principal Place of Business: New Principal Place of Business:

275 96TH AVENUE NORTH 5558 1/2 PARK BLVD. UNIT 1 PINELLAS PARK, FL 33781

ST. PETERSBURG, FL 33702

Current Mailing Address: New Mailing Address:

5335 66TH STREET N. 5558 1/2 PARK BLVD

SUITE 9 PINELLAS PARK, FL 33781 ST. PETERSBURG, FL 33709

FEI Number: 59-2254557 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KU, SU LIANG
5335 66TH STREET N.

ACCURACY ACCOUNTING SERVICE, INC.
5558 1/2 PARK BLVD.

SUITE 9 PINELLAS PARK, FL 33781 US
ST. PETERSBURG, FL 33709 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: DAR S HU 04/22/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D/P () Delete Title: D/P (X) Change () Addition

 Name:
 KU, SU LIANG
 Name:
 YANG, HUIJUN

 Address:
 5335 66TH STREET N., SUITE 9
 Address:
 5558 1/2 PARK BLVD.

 City-St-Zip:
 ST. PETERSBURG, FL 33709
 City-St-Zip:
 PINELLAS PARK, FL 33781

 Name:
 YEE, JOHN
 Name:
 PRESCOTT, AN-CHI

 Address:
 8405 BOULDER PLACE
 Address:
 5558 1/2 PARK BLVD.

 City-St-Zip:
 TAMPA, FL 33615
 City-St-Zip:
 PINELLAS PARK, FL 33781

Title: D/S () Delete Title: D/S (X) Change () Addition

 Name:
 HAN-RALSTON, HONGLING
 Name:
 WANG, JULIA

 Address:
 2202 N. WEST SHORE BLVD., SUITE 200
 Address:
 5558 1/2 PARK BLVD.

 City-St-Zip:
 TAMPA, FL 33607
 City-St-Zip:
 PINELLAS PARK, FL 33781

Name: KIM, DAVID Name: HU, DAR S

Address: 19211 DOVE CREEK DRIVE Address: 5558 1/2 PARK BLVD.
City-St-Zip: TAMPA, FL 33647 City-St-Zip: PINELLAS PARK, FL 33781

I hereby certify that the information supplied with this filing does not qualify for the 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: DAR S HU T 04/22/2007