FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 765962

(6)

CHINESE CHRISTIAN ALLIANCE CHURCH OF TAMPA BAY A

HUN, II	LOHIDA	1110.											
Principal Place	of Business			M	failing Address				†	III OFAII OIDI)	
312 EAST 123 TAMPA FL 33					312 EAST 127TH AVE TAMPA FL 33612								
									3. Date Incorporated or Qualified 12/03/1982	3a. Date	of Last 3/23/1	11 1	
2. Principal Place of Business					2a. Mailing Address				4. FEI Number			Applied For	1
21					6				59-2274742	<u></u>		Not Applicable	_
Suite, Apt. #, etc.					Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required				
Orty & State					City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip		Count	rv		Zip	Col	intry		This corporation has liability for in			ed to Fees	-
24		25	•	29		30	,			tangibie tax IYes □ N		. 199.032,	
9. Name and Address of Current					stered Agent				10. Name and Address of New Re				-
							B1 Nar	ne L	N, BURN JEN	G		·······	1
WANG, 1	TING-YEUN	IG.					82 Stre		s (P.O. Box Number is Not Acceptable				4
3003 BEACH DR							62 Stre	et Addres	s (P.O. Box Number is Not Acceptable	i)			
TAMPA F							83	1.1.1	TID PANCELANT F	21.125			┨
VI W.D. IV I	- 0000						<u> </u>		03 BAYSHORE F	SLV D.			╛
							84 City	TA	MPA	FL	85 Zi	ip Code 3 6 (
11. Pursuant t	to the provisi	ons of Sec	tions 617.0502	and 61	7.1508, Florida Statute	s, the abo	ve-named	corporat	ion submits this statement for the num	ose of chan	aina ite i	registered office	<u>.</u>
or register familiar wil	red agent, or thiland accer	both, in the	e State of Florid	7 Suct	h change was authorize 0803 Florida Statutes	ed by the	corporatio	n's board	of directors. I hereby accept the appoi	ntment as re	gisterec	Lagent. Lam	
SIGNATURE	Y	pr tric ocing		10.1) I Office Chardies.				4/28	196			
SIGNATURE _	gnature, typed	or printed name	o of registered ligery	$\mathcal{U}_{\mathcal{F}}$	anulcally (NO	TE: Rugisture:	l Agent signar	на гедилей м	tren reinstating)	DATE			1_
12.			OFFICERS AND	DIREC	······································	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND [DIRECTO	DRS IN 12	CB2E037 (12/05)
3J1IT	PD				DEFELE	1.1 (TLE	PD		×	Change	Addition] દ
NAME		TING-YEL	ING			1.2 N	AME	LI	N, BURN JENG				2
STREET ADDRESS		ACH DR				1.3 \$	TREET ADORE	ss 46	03 BAYSHORE BLV	Ρ,			}
CITY - ST - ZIP	TAMPA	<u>FL</u>				1.4 C	ITY - ST - ZIP	17	MPA , FL 33011				12
TITLE	SD				⊠ DELETE	2 1 T	TLE	SD		×	Change	☐ Addition	70
NAME	LIN, CO	NSTANCE	T			22 N	AME		ANG, TING-YELING				
STREET ADDRESS		HESPER	des st.			238	AROCA TEENT		OB BEACH DR.				
CITY-ST-ZIP	TAMPA	<u>FL</u>				240	ITY - ST - ZIP	TE	MPA, FL 33629				İ
TITLE	TD				DELETE	3 1 7	TLE ,				Change	Addition	1
NAME	DANIEL,					3 2 N	AME						
STREET ADDRESS		REENWIC	H DR.			335	IREET ADDRE	SS					-
CITY-ST-ZIP	TAMPA	FL			F-10-1-1-1		HTY-ST-ZIP						
TITLE					DELETE	4 1 Ti	TLE	1			Change	■ Addition	
NAME						4 2 h	IAME						
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CITY-ST-ZIP							TY-ST-ZIP		<u>- 50000185</u>	991	-		
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NAME						5 2 N			***61.25				
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CITY-ST-ZIP					F705.54		TY - ST - ZIP						
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NAME						6 2 N						5 /.	
STREET ADDRESS						63S	REET ADDRES	SS				11 31	1
CITY-ST-ZIP						6.4 CI	TY-ST-ZIP					,	1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Fiorida 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 13 if chapged, or on an attachment with an address. SIGNATINE AND TYTED OF PAINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

TING-YEUNG

3-18-96

Date

(813)398-9309

Daytime Phone #