

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:14

DOCUMENT # 857800 (7)

1. Corporation Name

KUN-YOUNG CHIU & ASSOCIATES, INC.

Principal Place of Business

109 EAST ADAIR STREET
VALDOSTA GA 31601

Mailing Address

109 EAST ADAIR STREET
VALDOSTA GA 31601

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

SIERRA, JORGE E
ROUTE 10 BOX 900
LAKE CITY FL 32055

3. Date Incorporated or Qualified

09/20/1983

3a. Date of Last Report

03/23/1994

4. FEI Number

58-1416942

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, Name, Title, and Address of Registered Agent and Board of Directors)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTD
NAME	CHIU, KUN-YOUNG
STREET ADDRESS	109 E. ADAIR ST.
CITY - ST - ZIP	VALDOSTA GA
TITLE	VD
NAME	CHIU, TOSY M
STREET ADDRESS	109 E ADAIR ST.
CITY - ST - ZIP	VALDOSTA GA
TITLE	SD
NAME	INSCORE, PENNY L
STREET ADDRESS	109 E. ADAIR ST.
CITY - ST - ZIP	VALDOSTA GA
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	PTD	☐ Change ☐ Addition
1.2 NAME	Kun-young Chiu	
1.3 STREET ADDRESS	109 East Adair Street	
1.4 CITY - ST - ZIP	Valdosta, GA 31601	☐ Change ☐ Addition
2.1 TITLE	VD	
2.2 NAME	Tosy M. Chiu	
2.3 STREET ADDRESS	109 East Adair Street	
2.4 CITY - ST - ZIP	Valdosta, GA 31601	☒ Change ☐ Addition
3.1 TITLE	SD	
3.2 NAME	Donna O. Bradford	
3.3 STREET ADDRESS	109 East Adair Street	
3.4 CITY - ST - ZIP	Valdosta, GA 31601	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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 190.02(9)(b), Florida Statutes. I further certify that I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or 13 of this document or on an attachment with an address.

SIGNATURE:

Kun-young Chiu, President 2/02/95 (912) 244-4002

(Signature and Typed or Printed Name of Signing Officer or Director)

Date

Printed Name