

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 857800

FILED
Apr 09, 2003
Secretary of State

Entity Name: KUN-YOUNG CHIU & ASSOCIATES, INC.

Current Principal Place of Business:

109 EAST ADAIR STREET
VALDOSTA, GA 31601

New Principal Place of Business:

Current Mailing Address:

109 EAST ADAIR STREET
VALDOSTA, GA 31601

New Mailing Address:

FEI Number: 58-1416942 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIGHTOWER, RICHARD A
315 MEALY DR
ATLANTIC BEACH, FL 32233 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHIU, JEFFREY S
Address: 109 EAST ADAIR STREET
City-St-Zip: VALDOSTA, GA 31601

Title: T () Delete
Name: CHIU, TOSY M
Address: 109 EAST ADAIR STREET
City-St-Zip: VALDOSTA, GA 31601

Title: S () Delete
Name: BELL, DONNA O
Address: 109 E. ADAIR STREET
City-St-Zip: VALDOSTA, GA

Title: V () Delete
Name: CHIU, KUN-YOUNG
Address: 109 E ADAIR ST
City-St-Zip: VALDOSTA, GA 31601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: CHIU, JEFFREY S
Address: 109 E. ADAIR STREET
City-St-Zip: VALDOSTA, GA

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY S CHIU

PD

04/09/2003

Electronic Signature of Signing Officer or Director

_____ Date