2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# N00000000091

Entity Name: ASIA CONNECTION INC.

Current Principal Place of Business:

4725 EL DORADO DRIVE
TAMPA, FL 336155032 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 260475
TAMPA, FL 336850475 US

New Mailing Address:

FEI Number: 59-3619790 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROSE, WILLIAM E
4725 EL DORADO DRIVE
TAMPA, FL 336155032 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

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	ROSE, WILLIAM E	
Address:	4725 EL DORADO DRIVE	
City-St-Zip:	TAMPA, FL 336155032 US	
Title:	CD	( ) Delete
Name:	HEUBECK, KERRY	
Address:	P.O. BOX 114	
City-St-Zip:	SAN CRISTOBAL, NM 87564 US	
Title:	CD	( ) Delete
Name:	SMITH, HILARY	
Address:	40 OLD CEMETERY ROAD BOX 72	
City-St-Zip:	PEACHAM, VT 058620072 US	
Title:	CD	( ) Delete
Name:	ROSE, EDWARD K	
Address:	906 CAROLINA STREET - APT. 2	
City-St-Zip:	SAN FRANCISCO, CA 941073337 US	
Title:	CD	( ) Delete
Name:	SHELHAMER, H'KRIH	
Address:	2316 N 8TH STREET	
City-St-Zip:	TACOMA, WA 98403 US	
Title:	CD	( ) Delete
Name:	HAVICAN, JOHN	
Address:	14808 AFSHARI CIRCLE	
City-St-Zip:	FLORISSANT, MO 630341502 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	CD	(X) Change ( ) Addition
Name:	SHELHAMER, H'KRIH	
Address:	217 CLAUDIA STREET	
City-St-Zip:	SAN ANTONIO, TX 78210 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM E. ROSE DIR. 04/08/2009

Electronic Signature of Signing Officer or Director — Date