2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000003220

FILED Jan 12, 2008 Secretary of State

Entity Name: LAOTIAN AMERICAN SOCIAL COMMITTEE OF PINELLAS COUNTY, INC.

	Principal Place of Busin	ess:	New Principal Pla	New Principal Place of Business:	
	H STREET NORTH TERSBURG, FL 33713	US			
Current Mailing Address:		New Mailing Add	ress:		
	H STREET NORTH TERSBURG, FL 33713	US			
FEI Number	: FEI Numb	per Applied For ()	FEI Number Not Applicable (X	Certificate of Status Desired ()	
Name and	d Address of Current Re	gistered Agent:	Name and Addres	ss of New Registered Agent:	
160 EAST SUITE 202 BARTOW The above	, FL 338304647 US	s statement for the p	ourpose of changing its regist	ered office or registered agent, or both,	
SIGNATU	RE:				
	Electronic Signatu	re of Registered Ag	ent	Date	
OFFICER	S AND DIRECTORS:		ADDITIONS/CHA	NGES TO OFFICERS AND DIRECTORS	
Title: Name: Address:	P () Delete KOMANY, ANDREW 2553 34TH AVE. N		Title: Name: Address:	() Change () Addition	
	SAINT PETERSBURG, FL 3	33713	City-St-Zip:		
City-St-Zip: Title: Name: Address:		ł		()Change ()Addition	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	SAINT PETERSBURG, FL 3 T () Delete VONGSALAY, COREY K 2327 47TH STREET NORTH	H 113 ASITH	City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	SAINT PETERSBURG, FL 3 T () Delete VONGSALAY, COREY K 2327 47TH STREET NORTH ST. PETERSBURG, FL 337 VP () Delete NOYTHANONGSY, KEOPRA 4225 56TH AVE. N	H 13 ASITH 33714	City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:		
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	SAINT PETERSBURG, FL 3 T () Delete VONGSALAY, COREY K 2327 47TH STREET NORTH ST. PETERSBURG, FL 337 VP () Delete NOYTHANONGSY, KEOPRA 4225 56TH AVE. N SAINT PETERSBURG, FL 3 S () Delete KOMANY, LINDA 2553 34TH AVE. N.	H 113 ASITH 33714 33713	City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	() Change() Addition	

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: COREY VONGSALAY T 01/12/2008