

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003725

FILED
Apr 30, 2006
Secretary of State

Entity Name: FLORIDA ACUPUNCTURE ASSOCIATION, INC.

Current Principal Place of Business:

901 N. HERCULES AVE.
SUITE F
CLEARWATER, FL 33765 US

New Principal Place of Business:

7100 LAKE ELLENOR DR
ORLANDO, FL 32809 US

Current Mailing Address:

901 N. HERCULES AVE.
SUITE F
CLEARWATER, FL 33765 US

New Mailing Address:

7100 LAKE ELLENOR DR
ORLANDO, FL 32809 US

FEI Number: 59-3637152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HE, HONGIAN
901 N HERCULES AVE
SUITE F
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

HAI, LARRY
7100 LAKE ELLENOR DR
ORLANDO, FL 32809 US

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: LARRY HAN

04/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAN, LARRY AP
Address: 1650 ART MUSEUM DRIVE #19
City-St-Zip: JACKSONVILLE, FL 32207

Title: V () Delete
Name: TIAN, MIN AP
Address: 6821 SEABISCUIT TRAIL
City-St-Zip: TALLAHASSE, FL 32309

Title: S () Delete
Name: SHAO, LEYUN AP
Address: 2514 WEST VIRGINIA AVE
City-St-Zip: TAMPA, FL 33607

Title: T () Delete
Name: WANG, ZUOZHEN
Address: 11111 OAKHAVEN DR.
City-St-Zip: PINELLAS PARK, FL 33782

Title: T () Delete
Name: HAN, XIAODONG
Address: 2650 SE 40TH STREET
City-St-Zip: OCALA, FL 34480

Title: CEUD () Delete
Name: WANG, SHUDONG
Address: 10509 NW 57 CT
City-St-Zip: CORAL SPRINGS, FL 33076

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
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Address:
City-St-Zip:

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

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 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: LARRY HAN

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date