

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003725

FILED
Mar 12, 2009
Secretary of State

Entity Name: FLORIDA ACUPUNCTURE ASSOCIATION, INC.

Current Principal Place of Business:

740 STIRLING CENTER PL
UNIT 1200
LAKE MARY, FL 32746 US

New Principal Place of Business:

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

Current Mailing Address:

740 STIRLING CENTER PL
UNIT 1200
LAKE MARY, FL 32746 US

New Mailing Address:

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

FEI Number: 59-3637152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZHU, HONGJIE AP
740 STIRLING CENTER PL
UNIT 1200
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

HE, HONGJIAN P
901 N. HERCULES AVE.
SUITE F
CLEARWATER, FL 33765 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: HONGJIAN HE

03/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LI, DAOFANG DR
Address: 901-B, EAST OAK STREET
City-St-Zip: KISSIMMEE, FL 34744

Title: V () Delete
Name: YU, WEIHUA AP
Address: 1025 E. HALLANDALE BEACH BLVD
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HE, HONGJIAN AP
Address: 901 N. HERCULES AVE. SUITE F
City-St-Zip: CLEARWATER, FL 33765

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

Title: T () Change (X) Addition
Name: CHEN, YONGJIAN AP
Address: 901 N. HERCULES AVE. SUITE F
City-St-Zip: CLEARWATER, FL 33765

Title: S () Change (X) Addition
Name: NIU, HUIJUN AP
Address: 7300 N FEDERAL HWY, SUITE 102
City-St-Zip: BOCA RATON, FL 33487

Title: D () Change (X) Addition
Name: XIAO ZHANG M.D.,
Address: 2514 W VIRGINIA AVE
City-St-Zip: TAMPA, FL 33607

Title: D () Change (X) Addition
Name: TIAN, MIN AP. PHD,
Address: 362 OFFICE PLAZA DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

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: HONGJIAN HE

P

03/12/2009

Electronic Signature of Signing Officer or Director

Date