

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000015

FILED
Apr 04, 2009
Secretary of State

Entity Name: ASSOCIATION OF SENIOR CITIZENS OF VIETNAMESE ORIGIN, INC.

Current Principal Place of Business:

4201 62ND AVE.N.
SUITE # 17
PINELLAS PARK, FL 33781

New Principal Place of Business:

Current Mailing Address:

129 N. WARBLER LANE
SARASOTA, FL 34236

New Mailing Address:

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

Name and Address of Current Registered Agent:

INGALLS, THANH D VP
4201 62ND AVE. N.
SUITE #17
PINELLAS PARK, FL 33781 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: VP () Delete
Name: INGALLS, THANH D
Address: 4201 62ND AVE. N
City-St-Zip: PINELLAS PARK, FL 33781

Title: P () Delete
Name: LUU, DANIEL M
Address: 129 N. WARBLER LANE
City-St-Zip: SARASOTA, FL 34234

Title: S () Delete
Name: NGUYEN, THI D
Address: 10313 BALTUSROL PLACE
City-St-Zip: BRADENTON, FL 32412

Title: T () Delete
Name: CHAU, KIM-SA T
Address: 10881 92ND ST N
City-St-Zip: LARGO, FL 33777

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: T (X) Change () Addition
Name: NGUYEN, HINH V
Address: 3960 30TH AVE, N
City-St-Zip: ST. PETERSBURG, FL 33713

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: DANIEL LUU

P

04/04/2009

Electronic Signature of Signing Officer or Director

Date