2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2009
Secretary of State

DOCUMENT# N01000005700

Entity Name: VO VI FRIENDSHIP ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

249 DELANCEY DR
DAVENPORT, FL 33837

New Principal Place of Business:

Current Mailing Address:

249 DELANCEY DR
DAVENPORT, FL 33837

New Mailing Address:

FEI Number: 65-1125938 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WYLLIE, WILLIAM F
414 WEST MEMORIAL BLVD.
LAKELAND, FL 33815 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: P ( ) Delete
Name: NGUYEN, ANTHONY V
Address: 249 DELANCEY DR
City-St-Zip: DAVENPORT, FL 33837

Title: VD ( ) Delete
Name: NGO, HONG N
Address: 4960 GREEN HILL ST.
City-St-Zip: COCOA, FL 32927

Title: SD ( ) Delete
Name: TRAN, LONG
Address: 6586 LAKE GLORIA SHORES BLVD
City-St-Zip: ORLANDO, FL 32809

Title: TD ( ) Delete
Name: NGUYEN, HUONG T
Address: 3375 PAISLEY CIR.
City-St-Zip: ORLANDO, FL 32817

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:

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: NGUYEN,ANTHONY V. P 05/06/2009

Electronic Signature of Signing Officer or Director — Date