
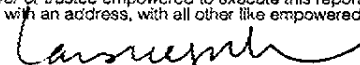


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 06, 2004 08:00 AM
Secretary of State

| | | |
|--|---|---|
| DOCUMENT # N02000003051 1. Entity Name THU DUC RESERVE OFFICERS ALUMNI ASSOCIATION OF CENTRAL FLORIDA, INC. | |  |
| Principal Place of Business 1823 N. HASTINGS STREET ORLANDO, FL 32808 | Mailing Address 1823 N. HASTINGS STREET ORLANDO, FL 32808 | |
| DO NOT WRITE IN THIS SPACE | | |
| 6. Name and Address of Current Registered Agent HUYNH, CAN 1823 N. HASTINGS STREET ORLANDO, FL 32808 | | DO NOT WRITE IN THIS SPACE |
| 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable</small> <small>DATE</small> | | |
| Filing Fee is \$61.25 Due by September 8, 2004 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | 1000000157688 05/06/04-80038-010 70.00 |
| 10. OFFICERS AND DIRECTORS | | |
| <small>TITLE</small> NAME <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small> | PD HUYNH, CAN 1823 N. HASTINGS STREET ORLANDO, FL 32808 | |
| <small>TITLE</small> NAME <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small> | VD PHAN, NGUONG D 1908 KINGSLAND AVENUE ORLANDO, FL 32808 | |
| <small>TITLE</small> NAME <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small> | VD NGUYEN, KHAN N 300 S. SOLANDRA DRIVE ORLANDO, FL 32807 | |
| <small>TITLE</small> NAME <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small> | SD CHAU, AN N 1416 PRAIRIE LAKE BLVD. ORLANDO, FL 32839 | |
| <small>TITLE</small> NAME <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small> | TD TY VAN LE 4840 JUDY ANN COURT ORLANDO, FL 32808 | |
| <small>TITLE</small> NAME <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small> | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | |
| SIGNATURE:  | | May 1/2004 (407)2951131 |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | <small>Date</small> <small>Daytime Phone #</small> |