

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000007492

FILED
Sep 26, 2005
Secretary of State

Entity Name: WAT LAOS THAMMAVANARAM, INC.

Current Principal Place of Business:

3120 E. ASH HARBOR DRIVE
JACKSONVILLE, FL 32224

New Principal Place of Business:

13490 ASHFORD WOOD COURT W
JACKSONVILLE, FL 32218

Current Mailing Address:

3120 E. ASH HARBOR DRIVE
JACKSONVILLE, FL 32224

New Mailing Address:

13490 ASHFORD WOOD COURT W
JACKSONVILLE, FL 32218

FEI Number: 06-1731146 **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:

KHOUNTHAM, KRISSTEEN D
3120 E. ASH HARBOR DRIVE
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

KHOUNTHAM, KRISSTEEN D P
13490 ASHFORD WOOD COURT W
JACKSONVILLE, FL 32218 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: KRISTEEN D KHOUNTHAM

09/26/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KHOUNTHAM, KRISTEEN D
Address: 3120 E. ASH HARBOR DRIVE
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP () Delete
Name: PHOMVONGSA, SAM
Address: 433 SARAH TOWN LANE
City-St-Zip: JACKSONVILLE, FL 32259

Title: T () Delete
Name: PHENGCHANH, MICKEY
Address: 12543 WILLOUGHTBY LANE
City-St-Zip: JACKSONVILLE, FL 32225

Title: T () Delete
Name: SANGSOUVANH, MONE
Address: 664 LEE ROAD
City-St-Zip: JACKSONVILLE, FL 32225

Title: S () Delete
Name: MANIVONG, LAMPANG
Address: 1318 BLUR FOGLE WAY E
City-St-Zip: JACKSONVILLE, FL 32225

Title: S () Delete
Name: VANNOUSONE, KEO
Address: 2728 LANTANA LAKE ROAD
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KHOUNTHAM, KRISTEEN D
Address: 13490 ASHFORD WOOD COURT WEST
City-St-Zip: JACKSONVILLE, FL 32218

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

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

Title: () Change () Addition
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Address:
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Title: () Change () Addition
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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 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 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: KRISTEEN D KHOUNTHAM

P

09/26/2005

Electronic Signature of Signing Officer or Director

Date