

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002153

FILED  
Mar 29, 2010  
Secretary of State

**Entity Name:** LAO-HMONG AMERICAN COALITION OF FLORIDA CHAPTER, INC.

**Current Principal Place of Business:**

518 WAYFARER DR  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

**Current Mailing Address:**

518 WAYFARER DR  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

**FEI Number:** 20-2374104

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEE, WANG Y  
518 WAYFARER DR  
TARPON SPRINGS, FL 34689 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  
Name: LEE, WANG Y  
Address: 518 WAYFARER DR  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VP  
Name: TONG, SENG D  
Address: 3443 CLEMONS RD  
City-St-Zip: PLANT CITY, FL 33566

Title: SECR  
Name: LEE, DAVID  
Address: 1469 SATSUMA ST  
City-St-Zip: CLEARWATER, FL 33756

Title: TREA  
Name: XIONG, SEAN T  
Address: 987 PRINCETON DRN ZOLFO  
City-St-Zip: CLERMONT, FL 34711

Title: BOD  
Name: XIONG, SONG L  
Address: 991 PRINCETON DR  
City-St-Zip: CLERMONT, FL 34711

Title: BOD  
Name: LEE, VANG C  
Address: 827 VIRGINIA ST  
City-St-Zip: DUNEDIN, FL 34698

I hereby 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 all other like empowered.

SIGNATURE: WANG LEE

P

03/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date