

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012074

FILED
Apr 28, 2006
Secretary of State

Entity Name: VOVINAM REUNION ASSOCIATION INC.

Current Principal Place of Business:

265 COLLEGE DRIVE
ORANGE PARK, FL 32065

New Principal Place of Business:

Current Mailing Address:

265 COLLEGE DRIVE
ORANGE PARK, FL 32065

New Mailing Address:

FEI Number: 33-1127929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUONG, VUI T
265 COLLEGE DRIVE
ORANGE PARK, FL 32065 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: LUONG, VUI MASTER
Address: 265 COLLEGE DRIVE
City-St-Zip: ORANGE PARK, FL 32065

Title: V () Delete
Name: NGUYON, JOHN Q PASTOR
Address: 440 SUMMIT DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: V () Delete
Name: VU, THO MASTER
Address: 700 N FORSYTH ROAD
City-St-Zip: ORLANDO, FL 32807

Title: D () Delete
Name: NGUYEN, CHINH MASTER
Address: 13143 ROSE WOOD GLEN DRIVE
City-St-Zip: CYPRESS, TX 77429

Title: D () Delete
Name: TRUONG, TAN
Address: 1131 PICKEREL CIR
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: TRAN, HUNG C
Address: 3090 LIVINGSTON ROAD
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: NGUYEN, JOHN Q PASTOR
Address: 440 SUMMIT DRIVE
City-St-Zip: ORANGE PARK, FL 32073

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 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: VUI LUONG

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date