2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N06000010109

Entity Name: KHMER KROM BUDDHIST TEMPLE OF FLORIDA, INC.

Current Principal Place of Business:

751 SUGAR MILL DR
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

2725 ZUNI RD
ST. CLOUD, FL 34771

Current Mailing Address:

751 SUGAR MILL DR
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

2725 ZUNI RD
ST. CLOUD, FL 34771

FEI Number: 20-8052977 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BEAZLEY, EDWARD H JR
221 N CAUSEWAY
NEW SMYRNA BEACH, FL 32169 US

Name and Address of New Registered Agent:

THACH, DOC
2725 ZUNI RD
ST. CLOUD, FL 34771 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: DOC THACH 04/30/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SALENH, LY
Address: 1816 DERBY GLEN DR
City-St-Zip: ORLANDO, FL 32837

Title: V ( ) Delete
Name: THACH, MY
Address: 3233 TINDALL ACRES RD
City-St-Zip: KISSIMMEE, FL 34744

Title: T ( ) Delete
Name: THACH, BOT
Address: 3050 GUS RD
City-St-Zip: KISSIMMEE, FL 34744

Title: S ( ) Delete
Name: THACH, DOC
Address: 2387 GREAT HARBOR DR
City-St-Zip: KISSIMMEE, FL 34746

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: LY SALENH P 04/30/2007
Electronic Signature of Signing Officer or Director — Date