

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006020

FILED
Mar 02, 2009
Secretary of State

Entity Name: TRI TUE QUANG BUDDHIST CENTER, INC.

Current Principal Place of Business:

2211 BARR CIRCLE
ORLANDO, FL 328075270

New Principal Place of Business:

818 WOODWARD STREET
ORLANDO, FL 328034036 US

Current Mailing Address:

2211 BARR CIRCLE
ORLANDO, FL 328075270

New Mailing Address:

818 WOODWARD STREET
ORLANDO, FL 328034036

FEI Number: 26-2918060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NGUYEN, TRI M
2211 BARR CIRCLE
ORLANDO, FL 328075270 US

Name and Address of New Registered Agent:

NGUYEN, TRI M
818 WOODWARD STREET
ORLANDO, FL 328034036 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:

03/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NGUYEN, TRI M
Address: 2211 BARR CIRCLE
City-St-Zip: ORLANDO, FL 328075270

Title: DV () Delete
Name: TRAN, HUON V
Address: 4443 FAIRVIEW AVE
City-St-Zip: ORLANDO, FL 32804

Title: DV () Delete
Name: LA, DUNG M
Address: 2211 BARR CIRCLE
City-St-Zip: ORLANDO, FL 328075270

Title: DT () Delete
Name: NGUYEN, HOALAN T
Address: 2211 BARR CIRCLE
City-St-Zip: ORLANDO, FL 328075270

Title: DS () Delete
Name: LA, DUNG M
Address: 2211 BARR CIRCLE
City-St-Zip: ORLANDO, FL 328075270

Title: DV () Delete
Name: TRAN, LAN T
Address: 1701 NW 30TH TERR
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: NGUYEN, TRI M
Address: 818 WOODWARD STREET
City-St-Zip: ORLANDO, FL 328034036 US

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

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

Title: DT (X) Change () Addition
Name: NGUYEN, HOALAN T
Address: 818 WOODWARD STREET
City-St-Zip: ORLANDO, FL 328034036 US

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: NGUYEN

P

03/02/2009

Electronic Signature of Signing Officer or Director

Date