

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010710

FILED
Jan 16, 2012
Secretary of State

Entity Name: LAOS WOMEN ASSOCIATION OF CENTRAL FLORIDA, INCORPORATED

Current Principal Place of Business:

296 ALDRUP WAY
LAKE MARY, FL 32746

New Principal Place of Business:

5440 MICCO DRIVE
ORLANDO, FL 32839

Current Mailing Address:

296 ALDRUP WAY
LAKE MARY, FL 32746

New Mailing Address:

1320 STELLAR DRIVE
OVIEDO, FL 32765

FEI Number: 27-1322710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SONTHALY, SOMMAY J
296 ALDRUP WAY
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

COLLINS, LEA
1320 STELLAR DRIVE
OVIEDO, FL 32765 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: LEA COLLINS

01/16/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SENGMAHY, SOMMALA
Address: 5440 MICCO DRIVE
City-St-Zip: ORLANDO, FL 32839

Title: VP
Name: CHITAKONE, DAVIDA
Address: 1932 TINDA ROAD
City-St-Zip: APOPKA, FL 32703

Title: S
Name: COLLINS, LEA
Address: 1320 STELLAR DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: T
Name: NAIYANET, NOUAN
Address: 1964 BORG COURT
City-St-Zip: APOPKA, FL 32703

Title: T
Name: CHITAKONE, DAVIDA
Address: 1932 TINDA ROAD
City-St-Zip: APOPKA, FL 32703

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: LEA COLLINS

S

01/16/2012

Electronic Signature of Signing Officer or Director

Date