## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Feb 13, 2002 8:00 am Secretary of State **DOCUMENT # N17528** 1. Entity Name VIETNAMESE ALLIANCE CHURCH OF ORLANDO, FLORIDA, 02-13-2002 90173 002 \*\*\*\*70.73 Principal Place of Business Mailing Address 7810 ALBANIA STREET % DUC HOAI NGUYEN ORLANDO FL 32810 7913 SEAGULL COURT US ORLANDO FL 32822 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2774371 Not Applicable Zip \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) NGUYEN, DUC HOAI 7913 SEAGULL COURT ORLANDO FL 32822 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to ೮೮೯ ಸ್ಟ್ರಾಕ್ಟ್ FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State AND A THE STATE OF ST 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ... ☐ Delete TITLE ☐ Addition NAME ..... DOAN, DUNGANH NAME STREET ADDRESS 9793 PINEY POINT CIRCLE STREET ADDRESS CITY-ST-7IP ORLANDO FL 32825 CITY-ST-ZIP VD. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME nguyen, dai STREET ADDRESS 1741 SNAREBROOK WAY STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP ☐ Addition TITLE Delete \_\_\_ TITLE NGUYEN, DUC HOAI, PASTOR NAME NAME STREET ADDRESS 7913 SEAGULL COURT STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP TD ☐ Delete TITI F Change Addition PHAM, TUNG QUANG NAME NAME STREET ADDRESS 530 WATERSCAPE WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Orlando FL 32828 TITLE □ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

SIGNANURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR GIRECTOR

Date

Date