


**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 06, 2003 8:00 am**  
**Secretary of State**

02-06-2003 90083 020 \*\*\*\*70.00

**DOCUMENT # N17528**

1. Entity Name  
**VIETNAMESE ALLIANCE CHURCH OF ORLANDO, FLORIDA, INC.**



Principal Place of Business  
**7810 ALBANIA STREET  
ORLANDO FL 32810  
US**

Mailing Address  
**% DUC HOAI NGUYEN  
7913 SEAGULL COURT  
ORLANDO FL 32822**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip

3. Mailing Address  
**12737 NEWFIELD DR.**  
~~ORLANDO~~  
Suite, Apt. #, etc.  
City & State  
**ORLANDO FL**  
Zip  
**32837**  
Country  
**ORANGE**

4. FEI Number **59-2774371**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional -Fee Required-**

6. Name and Address of Current Registered Agent  
**NGUYEN, DUC HOAI  
7913 SEAGULL COURT  
ORLANDO FL 32822**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD DOAN, DUNGANH 9793 PINEY POINT CIRCLE ORLANDO FL 32825</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD NGUYEN, DAI 1741 SNAREBROOK WAY ORLANDO FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD NGUYEN, DUC HOAI, PASTOR 7913 SEAGULL COURT ORLANDO FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD PHAM, TUNG QUANG 530 WATERSCAPE WAY ORLANDO FL 32828</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T PHAM, VU NGUYEN 353 FIELDSTREAM WEST ORLANDO, FL 32825</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V NGUYEN, DAI 709 ROBY COURT DUNDEE, FL 33838</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P NGUYEN, DUC HOAI, PASTOR 12737 NEWFIELD DR. ORLANDO, FL 32837</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S PHAM, TUNG QUANG 530 WATERSCAPE WAY ORLANDO, FL 32828</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE:  **SIGNATURE REQUIRED** 2/4/03

CR2E037 (10/02)