DO NOT WRITE IN THIS SPACE

2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N25107 **

1. Entity Name

VIETNAMESE ASSOCIATION OF CENTRAL FLORIDA, INC.

700 N HAMPTON AVE ORLANDO FL 32803

City & State

HS

Principal Place of Business

2. Principal Place of Business

Mailing Address

PO BOX 533175 ORLANDO FL 32853-3175

700 North Hampton Ave Suite, Apt. #, etc.

Orlando & Florida

3. Mailing Address

32853-3175

City & State

P. Box Suite, Apt. #, etc. Box 533175

Orlando & Florida

4. FEI Number

7. Name and Address of New Registered Agent

Certificate of Status Desired

Applied For 59-3449802 Not Applicable

\$8.75 Additional Fee Required

Zip 32803 6. Name and Address of Current Registered Agent

Country

BUI, DAVID Q 700 N HAMPTON AVE ORLANDO FL 32803

Name

Country

U.S

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

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

David Q. Bui, President

4/12/2001

(NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable.

FILE NOW: **FEE IS \$61.25** 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition PD TITLE Change ☐ Delete TITLE NAME BUI, DAVID Q NAME STREET ADDRESS STREET ADDRESS 700 N HAMPTON AVE CITY-ST-ZIP ORLANDO FL 32803 CITY-ST-ZIP **Addition** Change ۷D ☐ Delete TITLE TITLE VD CHAU, AN NGOC NAME NAME Lam T. Vu 1416 PRAIRIE LAKE BLVD STREET ADDRESS STREET ADDRESS 125 Capehart Dr CITY-ST-ZIP. CITY-ST-ZIP OCOEE FL 34761 Orlando, Fl32808 🔀 Delete ☐ Change TITLE Addition DUNG Q BUI, DAVID M: 🛣 NAME NAME STREET ADDRESS 11821 ALAFAYA WOODS CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32826 TITLE ☐ Change ☐ Addition TITLE ☐ Delete UONG, THO T NAME 3946 VALENCIA GROVE LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32817 ☐ Addition Delete ☐ Change NGUYEN, TRAM T NAME NAME STREET ADDRESS STREET ADDRESS 4755 CHEROKEE ROSE DR CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32808 TITLE Delete TITLE Change Change ☐ Addition NAME ANH, NGUYET NAME Anh, Nguyet STREET ADDRESS STREET ADDRESS 2925 E SOUTH ST 616R N. Thornton Ave. CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32803

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.

SICMATION OF OUR Pavid Q. Bui, SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.

4/12/2001

Orlando.

F1 32803