2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25107

FILED Jun 18, 2004 Secretary of State

Entity Name: VIETNAMESE ASSOCIATION OF CENTRAL FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 1883 TILLSTREAM DR. ORLANDO, FL 32818 US **Current Mailing Address: New Mailing Address:** 1883 TILLSTREAM DR. ORLANDO, FL 32818 US FEI Number: 59-3449802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUYNH, NHON THANH 1883 TILLSTREAM DR. ORLANDO, FL 32818 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HUYNH, NHON THANH Name: Name: 1883 TILLSTREAM DR. Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: Title: VCD () Delete Title: VCD (X) Change () Addition Name: NGUYEN, LAN DUY Name: NGUYEN, LAN DUY Address: 5302 SUN VALLEY CT. Address: 1364 CENTURY OAK DR City-St-Zip: ORLANDO, FL 32808 City-St-Zip: OCOEE, FL 34761 Title: () Delete Title: (X) Change () Addition PHAM, THANH NGOC TRAN, HIEN T Name: Name: 306 S. SOLANDRA DR. Address: Address: 1405 W FAIRBANKS AVE City-St-Zip: ORLANDO, FL 32807 City-St-Zip: WINTERPARK, FL 32807 Title: () Delete Title: () Change () Addition PHAM, PHU BA Name: Name: 2004 KINGSLAND AVE. Address: Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: Title: VCD () Delete Title: VCD (X) Change () Addition TRAN, SON QVOC Name: Name: DUONG, LINH K 12020 BLAIREMONT WAY 1310 MEGAN WAY Address: Address: APOPKA, FL 32703 City-St-Zip: City-St-Zip: ORLANDO, FL 32825

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NHON HUYNH PD 06/18/2004