

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25107

FILED
Jan 10, 2005
Secretary of State

Entity Name: VIETNAMESE COMMUNITY OF CENTRAL FLORIDA INC.

Current Principal Place of Business:

1883 TILLSTREAM DR.
ORLANDO, FL 32818 US

New Principal Place of Business:

Current Mailing Address:

1883 TILLSTREAM DR.
ORLANDO, FL 32818 US

New Mailing Address:

FEI Number: 59-3449802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUYNH, NHON THANH
1883 TILLSTREAM DR.
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: HUYNH, NHON THANH
Address: 1883 TILLSTREAM DR.
City-St-Zip: ORLANDO, FL 32818

Title: VCD () Delete
Name: NGUYEN, LAN DUY
Address: 1364 CENTURY OAK DR
City-St-Zip: OCOEE, FL 34761

Title: T () Delete
Name: TRAN, HIEN T
Address: 1405 W FAIRBANKS AVE
City-St-Zip: WINTERPARK, FL 32807

Title: S () Delete
Name: PHAM, PHU BA
Address: 2004 KINGSLAND AVE.
City-St-Zip: ORLANDO, FL 32808

Title: VCD () Delete
Name: DUONG, LINH K
Address: 12020 BLAIREMONT WAY
City-St-Zip: ORLANDO, FL 32825

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VCD () Change (X) Addition
Name: NGUYEN, CHRIS
Address: 1126 ORAPAN LAND
City-St-Zip: WINDERMERE, FL 34786

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: HUYNH NHON

PD

01/10/2005

Electronic Signature of Signing Officer or Director

Date