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

DOCUMENT # N25107

1. Entity Name

VIETNAMESE ASSOCIATION OF CENTRAL FLORIDA, INC.



FILED May 07, 2003 8:00 am Secretary of State 05-07-2003 90142 013 ****70.00

| AITHAM | OL AGOCCIATION OF GENT | THE FEORIDA, INO | | | | | | |
|--|---|---|---------------------------------------|--|--|-----------------|---------------------------|--|
| Principal Place of Business 1883 TILLSTREAM DR. ORLANDO FL 32818 US | | Mailing Address 1883 TILLSTREAM DR. ORLANDO FL 32818 US | | | 1101 1101: 8011 1881 8181 810 | II 1384 1481 EE | I 8 i i i i 100 8 | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | □ сн | CHECK HERE IF MAKING CHANGES | | | |
| City & State | | City & State | | 4. FEI Number 59-3 , | 33 344300E | | plied For t Applicable | |
| Zip Country | | Zip Country | | 5. Certificate of Status | 5. Certificate of Status Desired See Required \$8.75 Additional Fee Required | | | |
| | 6. Name and Address of Current | Registered Agent | | 7. Name and Addres | s of New Registered | Agent | | |
| • | | | Name | | | | | |
| 1883 TILL | NHON THANH STREAM DR. | | Street Addi | ress (P.O. Box Number is Not | Acceptable) | · · · · · | | |
| ORLANDO FL 32818 | | | City | | FL Zip Code | | | |
| | Signature, typed or printed name of registered agent a | 9. Election Campai Trust Fund Contr | gistered Agent signature r | S5.00 May Be Added to Fees | Make Checi Florida Depar | k Payable | to | |
| 40 | OFFIGERS AND BU | TOTORO I | | ADDITIONS (OLIANISES | TO OFFIGERS AND DI | IDECTORS (N | 10 | |
| 10. | OFFICERS AND DIF | | 11. | ADDITIONS/CHANGES | O OFFICERS AND DI | Change | Addition | |
| NAME STREET ADDRESS | HUYNH, NHON THANH 1883 TILLSTREAM DR. ORLANDO FL 32818 | □ Delete | NAME STREET ADDRESS CITY-ST-ZIP | | | | L Addition | |
| NAME STREET ADDRESS | VCD NGUYEN, LAN DUY 5302 SUN VALLEY CT. ORLANDO FL 32808 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | Addition | |
| TITLE NAME STREET ADDRESS | T PHAM, THANH NGOC 306 S. SOLANDRA DR. ORLANDO FL 32807 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | es and the second | Change | Addition | |
| STREET ADDRESS | S PHAM, PHU BA 2004 KINGSLAND AVE. ORLANDO FL 32808 | □ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | □ Delete . | STREET ADDRESS , | RAN, SON QUI 1310 MEGAN L APOPKA, FL | WAY | ☐ Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | Change | Addition | |

12. Thereby 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.

April 30 -2003(407)296 4527