2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2007 8:00 am
Secretary of State
03-06-2007 90007 048 ****61.25

DOCUMENT # N34363

1. Entity Name
CAMBODIAN ASSOCIATION OF JACKSONVILLE, INC.

Principal Place of Business	Mailing Address
8540 LINCOLNSHIRE RD. W. JACKSONVILLE, FL 32217 US	CAMISODIAN ASSOCIATION OF JACKSONVILLE PO BOX 57744 JACKSONVILLE, FL 32241 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
8540 Lincolnshire Rd. W.	Cambodian Association of Jacksonville
Suite, Apt. #, etc.	Suite, Apt. #, etc. P.O. Box 440249
City & State Jacksonville, Florida	City & State Jacksonville, Florida
Zip / Country 32217 / USA	Zip / Country 32222-0249 / U.S.A

02202007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2967415
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
EANG, BUNTHAN 731 ACAPULCO RD. JACKSONVILLE, FL 32216	Name: Khaven Neak Street Address (P.O. Box Number is Not Acceptable): 5580 Ashleigh Park Drive City: Jacksonville **FL** Zip Code: 32244

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: Khaven Neak Khaven Neak 02-28-2007
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MAY, THIRITH MR. 8540 LINCOLNSHIRE RD. W. JACKSONVILLE, FL 32217	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Mrs.Margaret Tham 8049 Sable Creek Drive East Jacksonville, Fl. 32244	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CHIM, BORN MR. 8917 EASTON RIVER DR. JACKSONVILLE, FL 32257	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Mr. Thirith May 8540 Lincolnshire Rd. W Jacksonville, Fl. 32217	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D EANG, BUNTHAN MR. 731 ACAPULCO RD. JACKSONVILLE, FL 32216	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	General Secretary Mr. Khaven Neak 5580 Ashleigh Park Drive Jacksonville, Fl. 32244	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1-T SREY, BONNA N MRS. 13052 SIR ROGERS CT.S. JACKSONVILLE, FL 32224	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Mrs. Polly Mith 1462 Starboard Ct Orange Park, Fl. 32003	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2-T KOEUTH, NIMITH MRS. 731 ACAPULCO RD JACKSONVILLE, FL 32216	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	COM LAM, SAMOL MR. 2731 SPRING PARK RD. JACKSONVILLE, FL 32207	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Khaven Neak Khaven Neak 02-28-2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #