

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

**DOCUMENT # N35623**

1. Entity Name

Vietnamese Veterans Association Of Central Florida INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

Orlando, Florida

3. Mailing Address

1080 Lejay Street

Suite, Apt. #, etc.

1080 Lejay Street

Suite, Apt. #, etc.

City & State  
Orlando, Florida

City & State  
Orlando, Florida

Zip  
32825

Country  
Orange

Zip  
32825

Country  
Orange

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name **Cang H. Nguyen**

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

1080 Lejay Street

City **Orlando**

**FL**

Zip Code  
**32825**

**DO NOT WRITE  
IN THIS SPACE**

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

*Cang H. Nguyen*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

11/11/04

DATE

**FEE IS \$61.25**  
Initial or Amended UBR

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>President</b> <b>Nguyen, Cang H.</b> <b>1080 Lejay St. Orlando, FL 32825-6354</b>
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>Vice President</b> <b>Le, Lam P.</b> <b>5643 Pendleton Dr. Orlando, FL 32839</b>
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>Vice President</b> <b>Nguyen, Luong V.</b> <b>8624 Alegre Cir. Orlando, FL 32836</b>
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>Secretary General</b> <b>Mai, Toan V.</b> <b>13018 Jewelstone Way, Orlando, FL 32828</b>
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>800042829458</b> <b>12/10/04--01058--007 **175.00</b>
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<i>12/19</i>
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

12. 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Cang H. Nguyen*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/11/04 (407) 382-6552

Date

Daytime Phone #

FILED

04 DEC -9 PM 1:33

SECRETARY OF STATE

**800042829458**  
11/17/04--01032--013 \*\*70.00

**REINSTATEMENT**

DO NOT WRITE IN THIS SPACE

CR2E037B (12/01)