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**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N93000004814**

1. Corporation Name

**GAINESVILLE CHINESE SCHOOL, INC.**

Principal Place of Business

11208 NW 14TH AVE  
GAINESVILLE FL 32606  
US

Mailing Address

11208 NW 14TH AVE  
GAINESVILLE FL 32606  
US



2. Principal Place of Business

21 10715 NW 18<sup>th</sup> COURT

2a. Mailing Address

26 10715 NW 18<sup>th</sup> COURT

3. Date Incorporated or Qualified  
10/26/1993

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number  
59-2970130

Applied For  
Not Applicable

City & State

23 GAINESVILLE FL

City & State

28 GAINESVILLE FL

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

Zip Country

24 32606 25 U.S.A.

Zip Country

29 32606 30 U.S.A.

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

FRANKLIN, JENNY C  
11208 NW 14TH AVE  
GAINESVILLE FL 32606

10. Name and Address of New Registered Agent

81 Name

MICHI LIU

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

10715 NW 18<sup>th</sup> COURT

83

84 City

GAINESVILLE

FL

85 Zip Code

32606

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, for both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *[Signature]* (Principal) MICHI LIU

Jan 18, 99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

T  
FRANKLIN, JENNY C  
11208 NW 14TH AVE  
GAINESVILLE FL

☐ DELETE

T  
SHEN, CYNTHIA  
9933 SW 2ND PLACE  
GAINESVILLE FL

☐ DELETE

T  
CHOW, TAIYING  
115 NW 99 TERRACE  
GAINESVILLE FL

☐ DELETE

D  
KWONG, NG CHI  
5953 W DOUNERAY LOOP  
CRYSTAL RIVER FL

☒ DELETE

☐ DELETE

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRINCIPAL, D ☒ Change ☐ Addition  
1.2 NAME MICHI LIU  
1.3 STREET ADDRESS 10715 NW 18<sup>th</sup> COURT  
1.4 CITY-ST-ZIP GAINESVILLE FL 32606

2.1 TITLE D ☐ Change ☒ Addition  
2.2 NAME JOHN FANG C.F.  
2.3 STREET ADDRESS 2606 SE 28<sup>th</sup> STREET  
2.4 CITY-ST-ZIP Ocala, FL 34471

3.1 TITLE D ☐ Change ☒ Addition  
3.2 NAME Ju-Hwa KO  
3.3 STREET ADDRESS 13735 NW 39th AVE.  
3.4 CITY-ST-ZIP Gainesville, FL 32606

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan 18 99 (352) 331-8858

CR2E037 (11/98)