

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

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91773 049 *****61.25

DOCUMENT # N93000004814

1. Entity Name

GAINESVILLE CHINESE SCHOOL, INC.



Principal Place of Business

OAK HALL SCHOOL
8009 SW 14TH AVE.
GAINESVILLE FL 32607
US

Mailing Address

10715 NW 18TH COURT
GAINESVILLE FL 32606
US

2. Principal Place of Business

8009 SW 14th AVE
Suite, Apt. #, etc.
Gainesville FL
City & State

3. Mailing Address

10715 NW 18th COURT
Suite, Apt. #, etc.
Gainesville FL
City & State



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2970130**

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

Zip
32607

Country

Alachua

Zip

32606

Country

Alachua

6. Name and Address of Current Registered Agent

LIU, MICH
10715 NW 18TH COURT
GAINESVILLE FL 32606

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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

TITLE **D** ☐ Delete
NAME **CHENG, KENNY**
STREET ADDRESS **5522 NE 51 AVE.**
CITY-ST-ZIP **GAINESVILLE FL 32653**

TITLE **T** ☐ Delete
NAME **CHEUNG, YANN-NI**
STREET ADDRESS **8214 NW 63 PL**
CITY-ST-ZIP **GAINESVILLE FL 32653**

TITLE **D** ☐ Delete
NAME **LEE, RICHARD**
STREET ADDRESS **4229 NW 43RD ST. #B14**
CITY-ST-ZIP **GAINESVILLE FL 32606**

TITLE **D** ☐ Delete
NAME **LIU, MICH**
STREET ADDRESS **10715 NW 18TH COURT**
CITY-ST-ZIP **GAINESVILLE FL 32606**

TITLE **D** ☐ Delete
NAME **CHAN-OLMSTED, SYLVIA**
STREET ADDRESS **9535 SW 50TH RD.**
CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE **D** ☐ Delete
NAME **PATTERSON, NANCY**
STREET ADDRESS **5901 NW 97TH ST.**
CITY-ST-ZIP **GAINESVILLE FL 32653**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

3-18-2003 331-8858

CR2E037 (10/02)