FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 31 AM 10:24

DOCUMENT # **N94000003054 (3)**

1. Corporation Name
CLEARWATER HMONG ALLIANCE CHURCH, INC.

Principal Place of Business	Mailing Address
C/O LARGO ALLIANCE CHURCH 1633 LAKE AVE LARGO FL 34641	P O BOX 5741 CLEARWATER FL 34618-9998

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/21/1994
3a. Date of Last Report: 1/23/95
4. FEI Number: ☑ Applied For ☐ Not Applicable
5. Certificate of Status Desired: ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Largo Alliance Church	26 PO Box 5741
Suite, Apt. #, etc. 22 1633 Lake Ave	Suite, Apt. #, etc. 27
City & State 23 Largo, FL 34641	City & State 28 Clearwater FL
Zip / Country 24 34641 / 25 Pinellas	Zip / Country 29 34618 / 30 Pinellas

9. Name and Address of Current Registered Agent

XIONG, KHU X
64-K TANGLEWOOD DR W
CLEARWATER FL 34619

10. Name and Address of New Registered Agent

31 Name: The same.
32 Street Address (P.O. Box Number is Not Acceptable):
33
34 City: FL 35 Zip Code:

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Khu X. Xiong — 1/23/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CHURCH PLANTER (Same)	1.1 TITLE		☐ Change ☐ Addition
NAME	XAY KHU XIONG	1.2 NAME		
STREET ADDRESS	64 K Tanglewood Dr West.	1.3 STREET ADDRESS		
CITY-ST-ZIP	Clearwater FL 34619.	1.4 CITY-ST-ZIP		
TITLE	Board Elder / Tong Xeng Xiong	2.1 TITLE	Trusty Person	☐ Change ☑ Addition
NAME		2.2 NAME	TONG XENG XIONG	
STREET ADDRESS	735 Elm St	2.3 STREET ADDRESS	735 Elm St	
CITY-ST-ZIP	Safety Harbor FL 34695	2.4 CITY-ST-ZIP	SAFETY HARBOR FL 34695	
TITLE	XANG XIONG / Secretary	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS	735 Elm St	3.3 STREET ADDRESS		
CITY-ST-ZIP	Safety Harbor FL 34695	3.4 CITY-ST-ZIP		
TITLE	Treasurer (Same)	4.1 TITLE		☐ Change ☐ Addition
NAME	XIA XIONG	4.2 NAME		
STREET ADDRESS	5721 157 Av. North	4.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 34620	4.4 CITY-ST-ZIP		
TITLE	Vice Treasurer	5.1 TITLE	VICE TREASURER / MISSIONS	☐ Change ☑ Addition
NAME	NOU CHER XIONG	5.2 NAME	NOU CHER XIONG	
STREET ADDRESS	3815 SR 39 th North	5.3 STREET ADDRESS	3815 SR 39 th North	
CITY-ST-ZIP	PLANT CITY FL 33565.	5.4 CITY-ST-ZIP	Plant City FL 33565.	
TITLE	Board Elder (Same)	6.1 TITLE		☐ Change ☐ Addition
NAME	Jou Su Xiong.	6.2 NAME		
STREET ADDRESS	1101 E Colson Rd	6.3 STREET ADDRESS		
CITY-ST-ZIP	PLANT CITY FL 33565	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Khu X. Xiong — 1/23/95 — (813) 724 3219
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone #

0088307