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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000004427

1. Corporation Name

JACKSONVILLE CHINESE LIBRARY, INC.

Principal Place of Business

Mailing Address

12018 AMBROSIA CT  
JACKSONVILLE FL 32210  
US

5043 TIMOTHY LANE  
JACKSONVILLE FL 32210  
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

12018 Ambrosia Ct.

Jacksonville, FL 32223

Suite, Apt. #, etc.

12018 Ambrosia Ct.

City & State

Jacksonville, FL

Zip

Country

32223

U.S.A.

3. Date Incorporated or Qualified

09/09/1994

4. FEI Number

59-3266318

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

9. Name and Address of Current Registered Agent

SHAN, YEN  
12018 AMBROSIA COURT  
JACKSONVILLE FL 32223

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME CHEN, CHAO-MING  
STREET ADDRESS 3683 WEST OVER RD.  
CITY-ST-ZIP ORANGE PARK FL 32073

TITLE D ☐ DELETE

NAME ENG, JIMMY  
STREET ADDRESS 4305 S. BEND CIRCLE W.  
CITY-ST-ZIP JACKSONVILLE FL 32207

TITLE D ☐ DELETE

NAME KUNG, SIDNEY  
STREET ADDRESS 1962 RALEY CREEK DRIVE E.  
CITY-ST-ZIP JACKSONVILLE FL 32225

TITLE D ☐ DELETE

NAME LI, PAUL  
STREET ADDRESS 9031 WARWICKSHIRE RD.  
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE D ☐ DELETE

NAME LIU, FRANK  
STREET ADDRESS 3723 BESS ROAD  
CITY-ST-ZIP JACKSONVILLE FL 32211

TITLE P ☐ DELETE

NAME SHAN, YEN  
STREET ADDRESS 12018 AMBROSIA COURT  
CITY-ST-ZIP JACKSONVILLE FL 32223

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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:

YEN SHAN  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Yen Shan 3/9/1999 (904) 3664650

Date

Daytime Phone #

CR2E037 (1/98)