

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005719

FILED
Apr 14, 2004
Secretary of State

Entity Name: THE VIETNAMESE-AMERICAN MUTUAL ASSOCIATION OF TAMPA-BAY, INC.

Current Principal Place of Business:

2505 W POWHATTAN AVE
TAMPA, FL 33614 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 152453
TAMPA, FL 33684 US

New Mailing Address:

FEI Number: 59-3294371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NGUYEN, BI VAN
2973 BRADFORD CIRCLE
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NGUYEN, BI VAN
Address: 2973 BRADFORD CIRCLE
City-St-Zip: PALM HARBOR, FL 34685

Title: VD () Delete
Name: NGUYEN, VI H.
Address: 11314 BLOOMINGTON DRIVE
City-St-Zip: TAMPA, FL 33635

Title: VD () Delete
Name: CAO, CALVIN
Address: 16008 BURNHAM WAY
City-St-Zip: TAMPA, FL 33647

Title: S () Delete
Name: NGUYEN, DAVE
Address: 11812 LIPSEY ROAD
City-St-Zip: TAMPA, FL 33618

Title: TD () Delete
Name: CROSBY, LUU
Address: 4601 ST VINCENT STREET
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NGUYEN BIVAN

PD

04/14/2004

Electronic Signature of Signing Officer or Director

Date