

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002380

FILED
May 16, 2007
Secretary of State

Entity Name: UNITED LAO COMMUNITY OF FLORIDA, INC.

Current Principal Place of Business:

2644 17TH AVE NORTH
ST. PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

2644 17TH AVE NORTH
ST. PETERSBURG, FL 33713

New Mailing Address:

FEI Number: 59-3322400 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

THONGDARA, SOUVATH
3465 25TH ST NORTH
ST. PETERSBURG, FL 33713 US

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: DP () Delete
Name: THANTHIMA, TIEM
Address: 2644 17TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33713

Title: DV () Delete
Name: SISOMBATH, BO
Address: 2625 26TH AVE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: DT () Delete
Name: THONGDARA, PONEPHET
Address: 3465 25TH STREET N.
City-St-Zip: ST. PETERSBURG, FL 33713

Title: DS () Delete
Name: SAENKA, CHANSOUK
Address: 6550 43RD AVE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: T () Delete
Name: DARAPHET, PHONESAVANH
Address: 1901 43RD ST NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713

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 exemption stated in Chapter 119, 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: TIEM THANTHIMA

DP

05/16/2007

Electronic Signature of Signing Officer or Director

Date