2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000909

FILED Mar 31, 2008 Secretary of State

Entity Name: CAMBODIAN SOUTHERN BAPTIST FELLOWSHIP, INC.

Current Principal Place of Business: New Principal Place of Business:

1818 - 29TH AVE NO. 2528 STAPLEFORD LANE ST. PETERSBURG, FL 33713 ST. AUGUSTINE, FL 32092

Current Mailing Address: New Mailing Address:

P.O. BOX 61713 P.O. BOX 550775

ST. PETESBURG, FL 337841713 JACKSONVILLE, FL 32255

FEI Number: 59-3360142 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KANE, KEVIN SIENG, BOTIDA S

1818 - 29TH AVE. NORTH 2528 STAPLEFORD LANE

ST. PETERSBURG, FL 33713 US ST. AUGUSTINE, FL 32092 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: BOTIDA S. SIENG 03/31/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change() Addition

 Name:
 WONG, TZI WEI
 Name:
 NUON, SITHON

 Address:
 13106 NEW GATE RD
 Address:
 3419 EMAN DRIVE

 City-St-Zip:
 WOODRIDGE, VA 22193
 City-St-Zip:
 JACKSONVILLE, FL 32216

Title: D () Delete Title: () Change () Addition

 Name:
 KANE, KEVIN
 Name:

 Address:
 4335 17TH AVE N
 Address:

 City-St-Zip:
 ST PETE, FL 33713
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 NUON, SITHON
 Name:
 SIENG, BOTIDA S

 Address:
 3419 EMAN DR
 Address:
 2528 STAPLEFORD LANE

 City-St-Zip:
 JAX, FL 32216
 City-St-Zip:
 ST. AUGUSTINE, FL 32092

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: BOTIDA S. SIENG D 03/31/2008