

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**

**Apr 13, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # N96000003701**

1. Entity Name  
**CONFUCIUS-MANFUCIUS HOLY HOUSE, INC.**



Principal Place of Business  
**6309 HOFFNER AVENUE  
ORLANDO, FL 32822**

Mailing Address  
**6309 HOFFNER AVENUE  
ORLANDO, FL 32822**



04092007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3406314**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**HUANG, WILLIAM S  
2905 LAKEVIEW DRIVE  
FERN PARK, FL 32730**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

1100000707319

04/24/07-80066-017 61.25

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DP  
LIAO, CHI C  
6309 HOFFNER AVENUE  
ORLANDO, FL 32812**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DVS  
CHUNG, SUN Y  
6309 HOFFNER AVENUE  
ORLANDO, FL 32812**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
TSAI, HSIU L  
6309 HOFFNER AVENUE  
ORLANDO, FL 32812**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
HUANG, WILLIAM S  
2905 LAKEVIEW DRIVE  
FERN PARK, FL 32730**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: TSAI HSIU LUNG** *Hsiu Lung Tsa* **4/10/07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #