

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003969

FILED
Mar 10, 2009
Secretary of State

Entity Name: PHOUTHA PASARAM BUDDHIST TEMPLE, INC.

Current Principal Place of Business:

215 UNION CAMP ROAD
CRESCENT CITY, FL 32112 US

New Principal Place of Business:

Current Mailing Address:

215 UNION CAMP ROAD
CRESCENT CITY, FL 32112 US

New Mailing Address:

FEI Number: 59-3409822

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIENGKEO, HONGSAVADY
215 UNION CAMP RD
CRESCENT CITY, FL 32112 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: P () Delete
Name: VIENGKEO, HONGSAVADY
Address: 215 UNION CAMP RD.
City-St-Zip: CRESCENT CITY, FL 32112

Title: VPD () Delete
Name: SENEKEOUDOM, SENGDAO
Address: 124 STARLINGHT RD.
City-St-Zip: CRESCENT CITY, FL 32112

Title: SD () Delete
Name: SENGVANHPHENG, PHIENGSAI
Address: 1321 PETERS DR.
City-St-Zip: LEESBURG, FL 34748

Title: TD () Delete
Name: THIMAVONG, VAUGH
Address: 127 STARLINGHT
City-St-Zip: CRESCENT CITY, FL 32112

Title: TD () Delete
Name: BOUTAVONG, NOUKUNE
Address: 118 STARLINGHT RD.
City-St-Zip: CRESCENT CITY, FL 32112

Title: VP () Delete
Name: PAYANOUYONG, PHALY B
Address: 163 UNION CAMP RD.
City-St-Zip: CRESCENT CITY, FL 32112

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
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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: HONGSAVADY VEINGKEO

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date