

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003053

FILED
Jan 22, 2009
Secretary of State

Entity Name: THE CULTURAL AND EDUCATIONAL SCHOLARSHIP FOUNDATION OF CHINESE WOMEN'S CLUB OF GREATER MIAMI, INC.

Current Principal Place of Business:

13615 S. DIXIE HWY. STE. 114-388
MIAMI, FL 331767252

New Principal Place of Business:

Current Mailing Address:

10000 SW 63 PLACE
PINECREST, FL 33156

New Mailing Address:

FEI Number: 65-0938020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SACHER, CHARLES P
2655 LEJEUNE RD. STE. 1101
CORAL GABLES, FL 33134 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: D () Delete
Name: YEH, LYDIA
Address: 13611 DEERING BAY DR #801
City-St-Zip: CORAL GABLES, FL 33158

Title: D () Delete
Name: LEE, SUSAN
Address: 7141 SW 56TH ST
City-St-Zip: MIAMI, FL 33155

Title: DS () Delete
Name: HSIAO, CAROL
Address: 15456 S.W. 148TH STREET
City-St-Zip: MIAMI, FL 33196

Title: D () Delete
Name: KING, ANITA
Address: 11153 NW 71ST TER
City-St-Zip: DORAL, FL 33178

Title: DT () Delete
Name: TSENG, AMY H
Address: 10000 S.W. 63RD PLACE
City-St-Zip: MIAMI, FL 33156

Title: DP () Delete
Name: CHIEN, MARGARET
Address: 8440 NW 20TH COURT
City-St-Zip: SUNRISE, FL 33322

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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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: AMY TSENG

DT

01/22/2009

Electronic Signature of Signing Officer or Director

Date