

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005188

FILED
Mar 20, 2009
Secretary of State

Entity Name: ASIAN AMERICAN HERITAGE COUNCIL, INC.

Current Principal Place of Business:

5100 OLD HOWELL BRANCH RD
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

5100 OLD HOWELL BRANCH RD
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 59-3597522

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIU, RACHEL
5100 OLD HOWELL BRANCH RD
WINTER PARK, FL 32792 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: MADHANAGOPAL, TIM
Address: 1156 HOLLOW PINE DR
City-St-Zip: OVIEDO, FL 327652

Title: D () Delete
Name: SIU, RACHEL
Address: 5100 OLD HOWELL BRANCH RD
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: ZHANG, JIPING
Address: 102 ST. JOHNS LANDING DR.
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: NGUYEN, KAREN
Address: 210 SOUTHCOT DRIVE
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: ZHANG, JIPING
Address: 102 ST. JOHNS LANDING DR.
City-St-Zip: WINTER SPRINGS, FL 32708

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: JIPING ZHANG

T

03/20/2009

Electronic Signature of Signing Officer or Director

Date