

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000001793

1. Entity Name

CLEARWATER CHINESE CHRISTIAN CHURCH INC.



FILED
Sep 05, 2001 8:00 am
Secretary of State

09-05-2001 90025 018 ****61.25

0012348

Principal Place of Business

2525 N MCMULLEN BOUTH RD
 CLEARWATER FL 33761
 US

Mailing Address

2525 N MCMULLAN BOUTH RD
 CLEARWATER FL 33761
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3407167**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HO, CHIN-FENG
 2275 WILLOWBROOK DR
 CLEARWATER FL 33764-6744

Name **CHIOU GEORGE**

Street Address (P.O. Box Number is Not Acceptable)

2658 MCMULLEN BOUTH Rd. APT #326

City **CLEARWATER**

FL

Zip Code **33761**

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.

SIGNATURE

Chiu George

SECRETARY

AUG 22 2001

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** Delete
 NAME **LIN, FRED**
 STREET ADDRESS **2976 ELYSIUM WAY**
 CITY-ST-ZIP **CLEARWATER FL**

TITLE **PD** Change Addition
 NAME **CHIOU GEORGE**
 STREET ADDRESS **2658 MCMULLEN BOUTH Rd. APT #326**
 CITY-ST-ZIP **CLEARWATER FL 33761**

TITLE **SD** Delete
 NAME **LEONG, SOKLIE**
 STREET ADDRESS **2630 BREWTON CT**
 CITY-ST-ZIP **CLEARWATER FL**

TITLE **SD** Change Addition
 NAME **CHANG KAN**
 STREET ADDRESS **103 HARBOR DR**
 CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE **TD** Delete
 NAME **HO, CHIN-FENG**
 STREET ADDRESS **2275 WILLOWBROOK DR**
 CITY-ST-ZIP **CLEARWATER FL 33764-6744**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE REQUIRED

Aug 22 2001 813 265 3985

CR2E037 (5/01)