

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756662

Entity Name: CHINESE AMERICAN ASSOCIATION OF CENTRAL FLORIDA, INC.**FILED**
Feb 09, 2024
Secretary of State
7031816028CC**Current Principal Place of Business:**879 OUTER ROAD
SUITE B
ORLANDO, FL 32814**Current Mailing Address:**879 OUTER ROAD
SUITE B
ORLANDO, FL 32814 US**FEI Number:** 59-2142487**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HO, PAULINE
879 OUTER ROAD
SUITE B
ORLANDO, FL 32814 US*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:** PAULINE HO

02/09/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	ANDERSON, AMY
Address	1373 SADDLERIDGE DRIVE
City-State-Zip:	ORLANDO FL 32835

Title	VP
Name	LIN, TINGPING
Address	896 RICH DRIVE
City-State-Zip:	OVIEDO FL 32765

Title	TREASURER
Name	LIU, SHENG
Address	203 SAN GABRIEL ST
City-State-Zip:	WINTER SPRINGS FL 32708

Title	DIRECTOR
Name	HOEH, SUSAN
Address	7709 BELVOIR DR
City-State-Zip:	ORLANDO FL 32835

Title	PRESIDENT
Name	HO, PAULINE
Address	879 OUTER ROAD SUITE B
City-State-Zip:	ORLANDO FL 32814

Title	DIRECTOR
Name	LAVENDER, TSUEY-ING
Address	1097 FAIRLAWN DR
City-State-Zip:	ROCKLEDGE FL 32955

Title	SECRETARY
Name	YODHH, JUDITH
Address	879 OUTER RAOD STE B
City-State-Zip:	ORLANDO FL 32814

I hereby 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 all other like empowered.

SIGNATURE: PAULINE HO

PRESIDENT

02/09/2024

Electronic Signature of Signing Officer/Director Detail

Date