

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000004684

**Entity Name:** FLORIDA HMONG COMMUNITY, INC.**Current Principal Place of Business:**2313 POLK RD  
WAUCHULA, FL 33873**Current Mailing Address:**2313 POLK RD  
WAUCHULA, FL 33873 US**FEI Number:** 37-1484574**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**XIONG, CHUEMONG  
2313 POLK RD  
WAUCHULA, FL 33873 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:** CHUEMONG XIONG

03/31/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            XIONG, CHUEMONG  
Address        2313 POLK RD  
City-State-Zip: WAUCHULA FL 33873

Title            VP  
Name            LOR, CHER XENG  
Address        10309 SEDGEBROOK PL  
City-State-Zip: RIVERVIEW FL 33569

Title            TREASURER  
Name            LEE, BENJAMIN  
Address        3201 STAGECOACH TRAIL  
City-State-Zip: WIMAUMA FL 33598

Title            CO-TREASURER  
Name            LEE, JAMMY DR.  
Address        3201 STAGECOACH TRAIL  
City-State-Zip: WIMAUMA FL 33598

Title            SPORTS COORDINATOR OFFICER  
Name            YANG, JOSEPH  
Address        1606 LARK LANE  
City-State-Zip: BRANDON FL 33510

Title            EVENTS COORDINATOR OFFICER  
Name            XIONG, YANG DR.  
Address        13731 MOONSTONE CANYON DRIVE  
City-State-Zip: RIVERVIEW FL 33579

Title            MARKETING DIRECTOR  
Name            YANG, LINDA  
Address        3606 RALSTON RD  
City-State-Zip: PLANT CITY FL 33566

Title            SECRETARY  
Name            MOUA, MIKE  
Address        2580 HIGHLANDS CREEK WAY  
City-State-Zip: LAKELAND FL 33813

**Continues on page 2**

*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:** JAMMY LEE**CO-TREASURER**

03/31/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title PUBLIC RELATIONS OFFICER  
Name YANG, PHOUA  
Address 13575 58TH ST N.  
SUITE 180  
City-State-Zip: CLEARWATER FL 33760

Title TALENT CHAIR/CULTURE  
Name LO, GEORGE  
Address 10119 CARP HOLLOW RD  
City-State-Zip: SUN CITY CENTER FL 33573

Title MUSIC/ENTERTAINMENT  
Name VANG, YENG  
Address 5960 COUNTY LINE RD  
City-State-Zip: LAKELAND FL 33811

Title SOCIAL MEDIA/PHOTOGRAPHY  
Name LEE, MAX  
Address 23715 LINDA LEE WAY  
City-State-Zip: FORT MYERS FL 33913

Title TALENT CHAIR/CULTURE  
Name LO, LY  
Address 10119 CARP HOLLOW RD  
City-State-Zip: SUN CITY CENTER FL 33573

Title EDUCATION/HEALTH  
Name HER, RON DR.  
Address 2365 POLK RD  
City-State-Zip: WAUCHULA FL 33873

Title SOCIAL MEDIA/PHOTOGRAPHY  
Name LEE, MEGAN  
Address 23715 LINDA LEE WAY  
City-State-Zip: FORT MYERS FL 33913