

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000006981

**FILED**  
**Mar 08, 2016**  
**Secretary of State**  
**CC5501906843**

**Entity Name:** TALLEST TREE CUONG NHU CENTER, INC.

**Current Principal Place of Business:**

809 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 32601

**Current Mailing Address:**

809 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 32601

**FEI Number: 86-1080988**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

THOMAS, RON K  
824 NE 4TH AVE.  
GAINESVILLE, FL 32601 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: RON THOMAS**

**03/08/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name THOMAS, RON  
Address 824 NE 4TH AVE.  
City-State-Zip: GAINESVILLE FL 32601

Title D  
Name GUERIN, DENISE  
Address 824 NE 4TH AVE.  
City-State-Zip: GAINESVILLE FL 32601

Title D  
Name SCHILLING, LOUIS  
Address 2020 SW 79TH DR  
City-State-Zip: GAINESVILLE FL 32607

*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: RON THOMAS**

**OFFICER**

**03/08/2016**

Electronic Signature of Signing Officer/Director Detail

Date