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: LE, ON THI

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes

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	: ON LE			11/14/2019
	Electronic Signature of Registered Agent			Date
Officer/Direc	ctor Detail :			
Title	PRESIDENT	Title	SECRETARY	
Name	LE, ON THI	Name	NGUYEN, NGOC GIANG	
Address	2412 TOMOKA FARMS RD.	Address	2412 TOMOKA FARMS RD.	
City-State-Zip:	PORT ORANGE FL 32128	City-State-Zip:	PORT ORANGE FL 32128	
Title	OFFICER, DIRECTOR			
Name	NGUYEN, ANH THI QUE			
Address	2412 TOMOKA FARMS RD.			

FEI Number: 36-4781205

2412 TOMOKA FARMS RD.

Entity Name: VIETNAMESE BUDDHIST OF PORT ORANGE INC

2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

Current Principal Place of Business:

2412 TOMOKA FARMS RD. PORT ORANGE. FL 32128

REPORT

DOCUMENT# N14000001850

Current Mailing Address:

PORT ORANGE, FL 32128 US

City-State-Zip: PORT ORANGE FL 32128

Name and Address of Current Registered Agent:

LE, ON T 2412 TOMOKA FARMS RD. PORT ORANGE, FL 32128 US

11/14/2019 Date

PRESIDENT