## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003054

Entity Name: CLEARWATER HMONG ALLIANCE CHURCH OF THE

CHRISTIAN AND MISSIONARY ALLIANCE, INC.

**Current Principal Place of Business:** 

2813 30TH AVE N.

ST. PETERSBURG, FL 33713

**Current Mailing Address:** 

2813 30TH AVE N.

ST. PETERSBURG, FL 33713 US

FEI Number: 20-8795300 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YANG, SUM XENG 2813 30TH AVE N.

ST. PETERSBURG, FL 33713 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: YANG SUM XENG 01/21/2015

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title TREASURER Title PASTOR

Name CHANG, YOUCHANG Name YANG, SUM XENG
Address 7010 62ND ST NORTH Address 2813 30TH AVE N.

City-State-Zip: PINELLAS PARK FL 33781 City-State-Zip: ST. PETERSBURG FL 33713

Title VICE CHAIRMAN Title SECRETARY

NameXIONG, BUNameCHANG, SONG GERAddress5202 BONITA DRIVEAddress1115 13TH AVE NW

City-State-Zip: WIMAUMA FL 33598 City-State-Zip: LARGO FL 33770

Title ASST. TREASURER Title ADVISOR

Name HER, ALAN Name CHANG, NHIA SENG

Address 7905 GLEN MEADOW DRIVE Address 5617 60TH WAY NORTH

City-State-Zip: LAKELAND FL 33810 City-State-Zip: ST. PETERSBURG FL 33709

Title ADVISOR

Name HANG, CHER TOUA
Address 3612 RALSTON ROAD
City-State-Zip: PLANT CITY FL 33566

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: SONG GER CHANG SECRETARY 01/21/2015

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 21, 2015

**Secretary of State** 

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