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May 01 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 734471 (6)

1. Corporation Name

TEMPLE OF THE UNIVERSE, INC.

Principal Place of Business

Mailing Address

RT-3-BOX-90
ALACHUA FL 32615

RT-3-BOX-90
ALACHUA FL 32615-8577



3. Date Incorporated or Qualified
12/02/1975

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 15151 NW 99th Street

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite A

27

City & State

City & State

23 Alachua, FL

28

Zip

Country

Zip

Country

24 32615

25 USA

29

30

4. FEI Number
51-0187543

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SINGER, MICHAEL A
RT. 3, BOX 90
ALACHUA FL 32615

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

15151 NW 99th St

83

Alachua

84 City

FL

85 Zip Code

32615

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VSTD ☐ DELETE
NAME BURNS, TERRY R.
STREET ADDRESS RT 3 BOX 90
CITY-ST-ZIP ALACHUA, FLORIDA 00000

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 15151 NW 99th St
1.4 CITY-ST-ZIP Alachua FL 32615

TITLE PD ☐ DELETE
NAME SINGER, MICHAEL
STREET ADDRESS RT 3 BOX 90
CITY-ST-ZIP ALACHUA, FLORIDA 00000

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 15151 NW 99th St
2.4 CITY-ST-ZIP Alachua, FL 32615

TITLE D ☐ DELETE
NAME SINGER, DONNA
STREET ADDRESS RTE 3 BOX 90
CITY-ST-ZIP ALACHUA FL

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 15151 NW 99th St
3.4 CITY-ST-ZIP Alachua, FL 32615

TITLE D ☒ DELETE
NAME KARL, FREDERICK
STREET ADDRESS 4435 SW 58TH AVENUE
CITY-ST-ZIP GAINESVILLE FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Terry R. Burns*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/97
Date

Daytime Phone #0011397

CR2E037 (9/96)