


**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 29, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 734471</b> 1. Entity Name TEMPLE OF THE UNIVERSE, INC.	
--	---

Principal Place of Business 15151 NW 99TH ST SUITE A ALACHUA, FL 32615 US	Mailing Address 15151 NW 99TH STREET SUITE A ALACHUA, FL 32615 US
--	--

**DO NOT WRITE IN THIS SPACE**



03222004 No Chg-NP CR2E037 (10/03)

4. FEI Number 51-0187543	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
SINGER, MICHAEL A  
15151 NW 99TH ST  
ALACHUA, FL 32615

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>Filing Fee is \$61.25 Due by May 1, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
---	--	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD BURNS, TERRY R. 15151 NW 99TH ST ALACHUA, FLORIDA 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SINGER, MICHAEL 15151 NW 99TH ST ALACHUA, FLORIDA 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SINGER, DONNA 15151 NW 99TH ST ALACHUA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000098601  
03/29/04-80047-009 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Terry Rodhe Burns 3/23/04 (386) 462-7271  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Decimate Phone #