2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 24, 2008 8:00 am Secretary of State

1. Entity Nam	MEN I # N03874 FARIAN UNIVERSALIST FEI COUNTY, FLORIDA, INC.	LLOWSHIP OF			01-2	4-2008 9002:	5 038 ****′	70.00	
Principal Place PO BOX 829 SUMMERFIEL		Mailing Address PO BOX 829 SUMMERFIELD, FL 344	492			7 1188 1181 1211 1881 1871			
2. Principal P	tace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01192008	Chg-NP	CR2E037	(12/06)	
City & State	е	City & State			4. FEI Number 59-23194	450			pplied For at Applicat
Zip	Country	Zip	Coun	ntry	5. Certificate of	Status Desired		8.75 Add ee Require	
	6. Name and Address of Current R	legistered Agent			7. Name and A	ddress of New f	Registered Ag	gent	
MONITOO				Name Tan	ES E. Mc	Tartacle			
MCINTOSH, JAMES E 17118 SE 78TH LARCHMONT COURT THE VILLAGES, FL 32162				Street Address (P.O. Box Number	is Not Acceptabl	nt Cou	ret	,,
			-	City The U	llages		FL	Zip Code	
SIGNATURE .	Somes & The	Intos Se	. .						
	Signature Typed or printed name of registered agent ar			Agent signature required	<u> </u>		DATE		
- Oldivitotic	Signator typed or printed name of registered agent ar Filling Fee is \$61.25 Due by May 1, 2008	9. Election Can Trust Fund C	npaign Fir	nancing _	\$5.00 May Be Added to Fees	i i	DATE Make check rida Departr		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: