

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Feb 05, 2008  
Secretary of State

DOCUMENT# N04000000037

Entity Name: UNIVERSIDAD CRISTIANA LOGOS, INC

**Current Principal Place of Business:**

9000 REGENCY SQUARE BLVD.  
JACKSONVILLE, FL 32211

**New Principal Place of Business:**

**Current Mailing Address:**

9000 REGENCY SQUARE BLVD.  
JACKSONVILLE, FL 32211

**New Mailing Address:**

FEI Number: 71-0962979

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

TRAVIS, CHARLES  
11152 OAK RIDGE DR. SO.  
JACKSONVILLE, FL 32225 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: TRAVIS, CHARLES T DR.  
Address: 11152 OAK RIDGE DR. SO.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP/D ( ) Delete  
Name: SANCHEZ, EDWIN R  
Address: 1642 BOULDER ST  
City-St-Zip: JACKSONVILLE, FL 32207

Title: S/T ( ) Delete  
Name: TRAVIS, DEBORAH A  
Address: 11152 OAK RIDGE DR. SO.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: OF. ( ) Delete  
Name: CHAVEZ, RAUL DR.  
Address: 6953 CLOVIS RD  
City-St-Zip: JACKSONVILLE, FL 32205

Title: OF. ( ) Delete  
Name: ZACARIAS, MARCO DR.  
Address: 3463 MIDDLEBURY AVE.  
City-St-Zip: LAS VEGAS, NV 89121

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: OF. ( ) Change (X) Addition  
Name: VALDES, JUAN PASTOR  
Address: 3231 NW 16TH STREET  
City-St-Zip: MIAMI, FL 33125

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: EDWIN ROBERTO SANCHEZ

VP

02/05/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date