2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 12, 2000 8:00 am Secretary of State DOCUMENT # 711396 1. Entity Name UNIVERSAL SHRINE OF DIVINE GUIDANCE, INC. 04-12-2000 90018 026 ****61.25 Mailing Address Principal Place of Business 74 CALETA DRIVE 74 CALETA DRIVE CAMARILLO CA 93012-5106 CAMARILLO CA 93012-5106 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-6177712 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CARNEGIE. ROGER DEAN 830 N. ATLANTIC AVE., B505 9 7 9 7 6 COCOA BEACH FL 32931 Zip Code FL 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition ☐ Delete TITLE TITLE NAME NAME Karras, mark a c STREET ADDRESS STREET ADDRESS 74 CALETA DRIVE CITY-ST-7IP CITY-ST-ZIP CAMARILLO CA ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME Karras,evangeline a STREET ADDRESS STREET ADDRESS 74 CALETA DRIVE CITY-ST-ZIP CITY-ST-ZIP CAMARILLO CA ☐ Addition ☐ Delete Change TITLE NAME NAME BENNETT, DEMETRA H KARRAS STREET ADDRESS STREET ADDRESS 7417 CAPISTRANO AVE. CITY-ST-ZIP CITY-ST-ZIP West Hills Ca Change ☐ Addition ☐ Delete TITLE KARRAS, CONSTANTINOS G A. NAME STREET ADDRESS STREET ADDRESS 2700 HILOLA ST. CITY-ST-ZIP CITY-ST-ZIP miami fl X Change ☐ Addition ☐ Delete TITLE TITLE KARRAS, THOMAS A. NAME NAME KARRAS, THOMAS A 1005 TARPON COVE DR., #102 STREET ADDRESS 637 PALM CIRCLE WEST STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34110 CITY-ST-ZIP <u>Naples FL 34102</u>

qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and that my signature shall have the same legal effect as if made under oath; that I am an officer or director this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied with this filing does not indicated on this report or supplemental report is true and accurate of the corporation or the receiver or trustee empowered to execute. changed, or on an attachme

MARK ATHANASIOS C. KARRAS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

2000

(805) 388-3117

Change

☐ Addition

Daytime Phone #