

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711396

FILED  
Mar 05, 2009  
Secretary of State

**Entity Name:** UNIVERSAL SHRINE OF DIVINE GUIDANCE, INC.

**Current Principal Place of Business:**

74 CALETA DRIVE  
CAMARILLO, CA 930125106 US

**New Principal Place of Business:**

**Current Mailing Address:**

74 CALETA DRIVE  
CAMARILLO, CA 93012 US

**New Mailing Address:**

**FEI Number:** 59-6177712

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KARRAS, THOMAS A  
6340 TIDEWATER ISLAND CIR.  
FORT MYERS, FL 33908 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: PD ( ) Delete  
Name: KARRAS, ATHANASIOS C MARK  
Address: 74 CALETA DRIVE  
City-St-Zip: CAMARILLO, CA 93012

Title: VSD ( ) Delete  
Name: KARRAS, EVANGELINE A  
Address: 74 CALETA DRIVE  
City-St-Zip: CAMARILLO, CA 93012

Title: TD ( ) Delete  
Name: BENNETT, DEMETRA  
Address: 28672 LAKECREST AVENUE  
City-St-Zip: CANYON COUNTRY, CA 91387

Title: D ( ) Delete  
Name: KARRAS, CONSTANTINOS G A.  
Address: 6340 TIDEWATER ISLAND CIRCLE  
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete  
Name: KARRAS, THOMAS A  
Address: 6340 TIDEWATER ISLAND CIRCLE  
City-St-Zip: FORT MYERS, FL 33908

**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:

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: MARK ATHANASIOS C KARRAS

PRES

03/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date