

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90749 015 ****61.25

DOCUMENT # 711396

1. Entity Name

UNIVERSAL SHRINE OF DIVINE GUIDANCE, INC.



Principal Place of Business

**74 CALETA DRIVE
CAMARILLO CA 93012-5106
US**

Mailing Address

**74 CALETA DRIVE
CAMARILLO CA 93012
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-6177712**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CARNEGIE, ROGER DEAN
830 N. ATLANTIC AVE., B505
COCOA BEACH FL 32931**

Name **THOMAS A. KARRAS**

Street Address (P.O. Box Number is Not Acceptable)

6340 TIDEWATER ISLAND CIRCLE

City **FORT MYERS**

FL

Zip Code
33908

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **KARRAS, MARK A C**
STREET ADDRESS **74 CALETA DRIVE**
CITY-ST-ZIP **CAMARILLO CA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VSD** ☐ Delete
NAME **KARRAS, EVANGELINE A**
STREET ADDRESS **74 CALETA DRIVE**
CITY-ST-ZIP **CAMARILLO CA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **BENNETT, DEMETRA H KARRAS**
STREET ADDRESS **28672 LAKECREST AVENUE**
CITY-ST-ZIP **CANYON COUNTRY CA 91351**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **KARRAS, CONSTANTINOS G A.**
STREET ADDRESS **6340 TIDEWATER ISLAND CIRCLE**
CITY-ST-ZIP **FORT MYERS FL 33908**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **KARRAS, THOMAS A**
STREET ADDRESS **6340 TIDEWATER ISLAND CIRCLE**
CITY-ST-ZIP **FORT MYERS FL 33908**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 authority empowered.

SIGNATURE: MARK CATHANASTOS [C. KARRAS] President

March 29, 2003

(805) 388-3117

CR2E037 (10/02)