

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 721022

1. Entity Name

UNIVERSAL LIFE UNIVERSITY INCORPORATED

Principal Place of Business

Mailing Address

601 THIRD STREET  
MODESTO CA 95351

601 THIRD STREET  
MODESTO CA 95351-3355  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

94-1599959

Applied For

Not Applicable

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

LAMAS, MICHAEL  
2347 WILSON STREET  
HOLLYWOOD FL 33020

Name

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

City

FL

Zip Code

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 *Lida B. Hensley*

(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  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	HENSLEY, KIRBY J, DD	
STREET ADDRESS	1766 POLAND ROAD	Deceased
CITY-ST-ZIP	MODESTO CA	
TITLE	VD	<input type="checkbox"/> Delete
NAME	IMBEAU, ROBERT E,	
STREET ADDRESS	38 RYAN AVE.	
CITY-ST-ZIP	MILL VALLEY CA	
TITLE	SD	<input type="checkbox"/> Delete
NAME	HENSLEY, LIDA G.	
STREET ADDRESS	1766 POLAND ROAD	
CITY-ST-ZIP	MODESTO CA	
TITLE	D	<input type="checkbox"/> Delete
NAME	MOORE, CHARLES B DD	
STREET ADDRESS	P O BOX 987 N/A	
CITY-ST-ZIP	SALOME AZ	
TITLE	D	<input type="checkbox"/> Delete
NAME	HENSLEY, ANDRE J	
STREET ADDRESS	1420 WOODLANE AVE	
CITY-ST-ZIP	MODESTO CA	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CHOVANAK, DAVE C	
STREET ADDRESS	2120 CARRIGAN	
CITY-ST-ZIP	TURLOCK CA	

TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Charles E. Moore	
STREET ADDRESS	4951 Netarts Hwy W.	
CITY-ST-ZIP	Tillamook, OR 97141	
TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert E. Imbeau	
STREET ADDRESS	38 Ryan Ave	
CITY-ST-ZIP	Mill Valley, CA 94941	
TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lida B. Hensley	
STREET ADDRESS	1766 Poland Rd.	
CITY-ST-ZIP	Modesto, CA 95358	
TITLE	Secretary & Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Marguerite Howarch	
STREET ADDRESS	718 Palm Ave	
CITY-ST-ZIP	Ripon, CA 95356	
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Andre Hensley	
STREET ADDRESS	1740 Poland Rd	
CITY-ST-ZIP	Modesto, CA 95358	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Susetta Lykins	
STREET ADDRESS	11127 Panther Peak Dr.	
CITY-ST-ZIP	Tucson, AZ 85743	

I2. 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 all other like empowered.

SIGNATURE: *Lida B. Hensley* **FILED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-4-2000

Date

209 527-8111

Daytime Phone #

CR2E037 (9/99)

**FILED**  
**Feb 29, 2000 8:00 am**  
**Secretary of State**

02-29-2000 90156 008 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE