2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#723520

FILED Jan 11, 2007 Secretary of State

Entity Name: THE UNIVERSAL ASSOCIATION OF SPIRITUAL LOVE, INC.

Current Principal Place of Business: New Principal Place of Business:

3705 OCEAN DR 3705 OCEAN DRIVE

VERO BCH, FL 32963 US VERO BEACH, FL 32963 US

Current Mailing Address: New Mailing Address:

P.O. BOX 3325 P.O. BOX 3325

VERO BEACH, FL 329643325 US VERO BEACH, FL 32964 US

FEI Number: 59-1847967 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CAROL ROMINE ROMINE, CAROL D
3705 OCEAN DR
3705 OCEAN DRIVE

VERO BCH, FL 32963 US VERO BCH, FL 32963 US

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: CAROL ROMINE 01/11/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: VP (X) Change () Addition

 Name:
 RODRIQUEZ, PHYLLIS,
 Name:
 RODRIGUEZ, PHYLLIS

 Address:
 875 NE 48TH ST 47
 Address:
 875 NE 48TH ST 47

City-St-Zip: POMPANO BCH, FL 33064 US City-St-Zip: POMPANO BCH, FL 33064 US

Title: D () Delete Title: D (X) Change () Addition Name: ROMINE, CAROL, Name: ROMINE, CAROL

 Address:
 3705 OCEAN DR
 Address:
 3705 OCEAN DRIVE

 City-St-Zip:
 VERO BCH, FL 32963 US
 City-St-Zip:
 VERO BCH, FL 32963 US

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 BEARD, DONALD,
 Name:
 BEARD, DONALD

 Address:
 3705 OCEAN DR
 Address:
 3705 OCEAN DR

 City-St-Zip:
 VERO BCH, FL 32963 US
 City-St-Zip:
 VERO BCH, FL 32963 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROL ROMINE D 01/11/2007