

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91200 033 ****61.25

DOCUMENT # 753286

1. Entity Name

THE CHURCH OF GOD (UNIVERSAL), INC.

Principal Place of Business

**121 N.W. 8TH AVE.
 BOYNTON BEACH FL 33435
 US**

Mailing Address

**P O BOX 1540
 BOYNTON BECH FL 33435
 US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1670208

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BUSBY, REV. ALBERTO FERNANDO
 706 S.W. 23RD AVENUE
 P O BOX 594
 BOYNTON BEACH FL 33435**

7. Name and Address of New Registered Agent

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 _____

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

TITLE **PD** Delete
 NAME **SANDY, NATHANIAL**
 STREET ADDRESS **2141 N.E. 1ST WAY**
 CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE **VD** Delete
 NAME **SANDY, VIRGINIA**
 STREET ADDRESS **2141 N.E. 1ST WAY**
 CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE **TD** Delete
 NAME **SMITH, VILDA**
 STREET ADDRESS **12774 61ST ALNE N**
 CITY-ST-ZIP **WEST PALM BEACH FL 33412**

TITLE **D** Delete
 NAME **WICKHAM, REITA**
 STREET ADDRESS **2491 N.W. 1ST ST.**
 CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE **P** Delete
 NAME **SMITH, JOSEPH**
 STREET ADDRESS **3150 E. ATLANTIC DR.**
 CITY-ST-ZIP **BOYNTON BEACH FL 33435**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 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 all other like empowered.

SIGNATURE: _____

SIGNATURE OF DIRECTOR Joseph Smith

4/27/02

561-7919082

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)