

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 23, 2004 8:00 am**  
**Secretary of State**

04-23-2004 90188 049 \*\*\*\*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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE CR2E037 (11/03)

4. FEI Number

59-1670208

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

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

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. 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**  
**Due By May 1, 2004**

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	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	SANDY, NATHANIAL	2141 N.E. 1ST WAY	BOYNTON BEACH FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VD	SANDY, VIRGINIA	2141 N.E. 1ST WAY	BOYNTON BEACH FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
TD	SMITH, VILDA	12774 61ST ALNE N	WEST PALM BEACH FL 33412	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	WICKHAM, REITA	2491 N.W. 1ST ST.	BOYNTON BEACH FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
P	SMITH, JOSEPH	3150 E. ATLANTIC DR.	BOYNTON BEACH FL 33435	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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: *Joseph Smith* *Joseph Smith* 4/19/04 361-7919082  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #