


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2008 8:00 am
Secretary of State

05-22-2008 90023 009 ****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 - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-1670208	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SANDY, VIRGINIA 2141 NE 1ST HAY 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	VD	<input checked="" type="checkbox"/> Delete	TITLE	PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SANDY, VIRGINIA		NAME	GEORGE JOHN	
STREET ADDRESS	2141 N.E. 1ST WAY		STREET ADDRESS	2141 NE 1st WAY	
CITY-ST-ZIP	BOYNTON BEACH, FL		CITY-ST-ZIP	BOYNTON BEACH, FL 33435	
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, VILDA		NAME	WINDEL HUDSON	
STREET ADDRESS	12774 61ST ALNE N		STREET ADDRESS	10152 SOUTHERN PRIDE PLACE	
CITY-ST-ZIP	WEST PALM BEACH, FL 33412		CITY-ST-ZIP	WELLINGTON, FL 33467	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WICKHAM, REITA		NAME	MILLER DANE	
STREET ADDRESS	2491 N.W. 1ST ST.		STREET ADDRESS	2141 NORTH EAST 1st WAY	
CITY-ST-ZIP	BOYNTON BEACH, FL		CITY-ST-ZIP	BOYNTON BEACH, FL 33435	
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	TREASURER/SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, JOSEPH		NAME	ESTHER BROWN	
STREET ADDRESS	3150 E. ATLANTIC DR.		STREET ADDRESS	2141 NORTH EAST 1st WAY	
CITY-ST-ZIP	BOYNTON BEACH, FL 33435		CITY-ST-ZIP	BOYNTON BEACH, FL 33435	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____		VICE PRESIDENT		4/23/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	