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FILED

Feb 04 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 762279 (8)

1. Corporation Name

UNIVERSAL LIFE CHURCH CONGREGATION NO. 49283, IN  
C.

Principal Place of Business

Mailing Address

1511 NE 116TH ST  
MIAMI FL 331611511 NE 116TH ST  
MIAMI FL 33161-69073. Date Incorporated or Qualified  
03/03/19823a. Date of Last Report  
02/09/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

94-1599959

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOWMAN-SHAW (TANYA)  
1511 NE 116TH STREET  
MIAMI FL 33161

81 Name Clive BOWMAN-SHAW

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

1511 NE 116TH STREET

83

84 City MIAMI

FL

85

Zip Code 33161

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

X Clive Bowman-Shaw

CLIVE BOWMAN-SHAW, MDT

1-27-97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME KINSER, RONALD C.  
STREET ADDRESS 261 EAST LINCOLN  
CITY-ST-ZIP GLENDALE HGHTS IL1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIPTITLE VTD ☒ DELETE  
NAME BOWMAN-SHAW (TANYA), D.D.  
STREET ADDRESS 1511 NE 116TH STREET  
CITY-ST-ZIP MIAMI FL2.1 TITLE MDT ☒ Change ☐ Addition  
2.2 NAME CLIVE BOWMAN-SHAW  
2.3 STREET ADDRESS 1511 NE 116TH STREET  
2.4 CITY-ST-ZIP MIAMI, FL 33161TITLE SD ☐ DELETE  
NAME KINSER, SHIRLEY D  
STREET ADDRESS 1511 NE 116TH ST.  
CITY-ST-ZIP MIAMI FL3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE PD ☐ DELETE  
NAME DESLAURIERS, KATHRYN  
STREET ADDRESS 1511 N.E. 116TH ST.  
CITY-ST-ZIP MIAMI FL4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIPTITLE D ☐ DELETE  
NAME COHODAR, ELJAH  
STREET ADDRESS 1499 NE 116TH STREET  
CITY-ST-ZIP MIAMI FL5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Clive Bowman-Shaw, MDT

1-27-97

305-893-6767

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0031894

CR2E037 (9/96)