

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 809568

FILED  
Feb 19, 2010  
Secretary of State

**Entity Name:** UNIVERSAL CHURCH OF THE MASTER

**Current Principal Place of Business:**

100 WEST RINCON  
#101  
CAMPBELL, CA 95008

**New Principal Place of Business:**

**Current Mailing Address:**

100 WEST RINCON  
#101  
CAMPBELL, CA 95008

**New Mailing Address:**

**FEI Number:** 94-6129988

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NOVAK, SARAH  
3700 40TH AVENUE NORTH  
SAINT PETERSBURG, FL 33714 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CLARK, SANDRA  
Address: 100 W RINCON #101  
City-St-Zip: CAMPBELL, CA 95008

Title: TD  
Name: EDWARDS, BEN  
Address: 100 W RINCON #101  
City-St-Zip: CAMPBELL, CA 95008 US

Title: VD  
Name: ANGELA, DEBRY  
Address: 100 W RINCON #101  
City-St-Zip: CAMPBELL, CA 95008 US

Title: SD  
Name: MULVANY, FELECIA  
Address: 100 W RINCON #101  
City-St-Zip: CAMPBELL, CA 95008 US

Title: D  
Name: RICHARD, JELUSICH  
Address: 100 W RINCON #101  
City-St-Zip: CAMPBELL, CA 95008 US

Title: D  
Name: DONNA, ZEHNER  
Address: 100 W RINCON #101  
City-St-Zip: CAMPBELL, CA 95008 US

I hereby 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 all other like empowered.

SIGNATURE: FELECIA MULVANY

SD

02/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date