

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 809568

FILED
Mar 11, 2003
Secretary of State

Entity Name: UNIVERSAL CHURCH OF THE MASTER

Current Principal Place of Business:

100 WEST RINCON
#222
CAMPBELL, CA 95008

New Principal Place of Business:

Current Mailing Address:

100 WEST RINCON
#222
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:

SMITH, RICHARD
20251 HASKINS RD
NO FT MYERS, FL 33917 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 () Delete
Name: CLARK, SANDRA
Address: 1417 ROCKLIN CT
City-St-Zip: SAN JOSE, CA 95131

Title: TD () Delete
Name: EDWARDS, BEN
Address: 4638 CONSTANCE DR
City-St-Zip: SAN DIEGO, CA 92115

Title: VD () Delete
Name: GARRY, THOMAS
Address: 2612 WALLACE STREET
City-St-Zip: SANTA CLARA, CA

Title: S () Delete
Name: MULVANEY, FELECIA
Address: 1516 CURTISS AVE
City-St-Zip: SAN JOSE, CA 95125

Title: D () Delete
Name: DERBY, ANGELA
Address: 2434 RAGGIO AVE
City-St-Zip: SANTA CLARA, CA 95051

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: PHELAN, ARLENE
Address: 1243 EAST MEADOW LARK LANE
City-St-Zip: COTTONWOOD, AZ 86326

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: SANDRA CLARK

P

03/11/2003

Electronic Signature of Signing Officer or Director

_____ Date