

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003514

FILED
Apr 21, 2008
Secretary of State

Entity Name: UNIVERSAL FOUNDATION FOR BETTER LIVING, INC.

Current Principal Place of Business:

21310 N.W. 37TH AVE
MIAMI GARDENS, FL 33056

New Principal Place of Business:

Current Mailing Address:

21310 N.W. 37TH AVE
MIAMI GARDENS, FL 33056

New Mailing Address:

FEI Number: 23-7373945 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUMPKIN, MARY A REV
21310 N.W. 37TH AVE
MIAMI GARDENS, FL 33056 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: CP () Delete
Name: TUMPKIN, MARY A REV
Address: 21310 N.W. 37TH AVE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: VCVP () Delete
Name: GINDRAW, FRANK JR
Address: 1850 BELMORE AVENUE
City-St-Zip: EAST CLEVELAND, OH 44112

Title: D () Delete
Name: CARRY, HELEN
Address: 11901 S. ASHLAND AVENUE
City-St-Zip: CHICAGO, IL 60643

Title: S () Delete
Name: GREEN, PHYLLIS REV
Address: 3 WORTHINGTON AVE TOWNHOUSE #1
City-St-Zip: KINGSTON JAMAICA, OC

Title: V () Delete
Name: SAFFOLD, JE
Address: 4303 RILEA WAY
City-St-Zip: OAKLAND, CA 94605

Title: T () Delete
Name: NOBLES, RALEIGH JR
Address: 10699 SAINT ANDREWS ROAD
City-St-Zip: BOYNTON BEACH, FL 33436

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: VD (X) Change () Addition
Name: SAFFOLD, JE
Address: 4303 RILEA WAY
City-St-Zip: OAKLAND, CA 94605

Title: TD (X) Change () Addition
Name: OGLESBY, LINDA
Address: 9222 S. CLAREMONT AVENUE
City-St-Zip: CHICAGO, IL 60620

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MARY A. TUMPKIN

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04/21/2008

Electronic Signature of Signing Officer or Director

_____ Date