

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000636

FILED
Mar 04, 2009
Secretary of State

Entity Name: FIRST UNIVERSAL PRIMITIVE CHURCH OF THE LORD, INC.

Current Principal Place of Business:

757-59 N.W. 95TH TER.
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

757-59 N.W. 95TH TER.
MIAMI, FL 33150

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PIERRE, JOSEPH T REV
1255 NW 125TH STREET
MIAMI, FL 33167 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: PIERRE, JOSEPH TURGOT
Address: 1255 N.W. 125TH STREET
City-St-Zip: NORTH MIAMI, FL 33167

Title: P () Delete
Name: MERONNE, DUNEL
Address: 20601 NW 10 AVENUE
City-St-Zip: MIAMI GARDENS, FL 33169

Title: D () Delete
Name: DUFREINE, DELI
Address: 1508 NW 100 STREET
City-St-Zip: MIAMI, FL 33161

Title: D () Delete
Name: DALEUS, JASCAME ASST
Address: 565 NW 151 STREET
City-St-Zip: MIAMI, FL 33161

Title: P () Delete
Name: DESRAVINES, JOSEPH
Address: 20 NE 139 STREET
City-St-Zip: MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: JOSEPH, DESRAVINES PASTOR
Address: 20 NE 139 TH STREET
City-St-Zip: MIAMI, FL 33161

Title: D (X) Change () Addition
Name: DUFREINE, DELI DEACON
Address: 1508 NW 100 STREET
City-St-Zip: MIAMI, FL 33161

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

Title: P (X) Change () Addition
Name: DUNEL, MERONE REV
Address: 20601 NW 10 TH AVENUE
City-St-Zip: MIAMI GARDENS, FL 33169

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: JOSEPH DESRAVINES

P

03/04/2009

Electronic Signature of Signing Officer or Director

Date