2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 06, 2005 8:00 am Secretary of State

DOCUMENT # N02000008765 1. Entity Name UNIVERSAL LIFE CHURCH OF OLD TOWN, INC.					05-06-200	5 90081 019	****61	1.25	
Principal Place of Business 11303 REDGATE STREET SPRING HILL, FL 34609 Mailing Address 11303 REDGATE STREET SPRING HILL, FL 34609 SPRING HILL, FL 34609									
2 Principal F	Place of Princes	2 Mailing Address							
2. Principal Place of Business		3. Mailing Address				83/H 88H 88H 88H 19H 1		IIIR) WL HWAL	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04272005	Chg-NP	CR2E037	(10/03)		
City & State		City & State		4. FEI Numbe 30-0127			→	pplied For at Applicable	
Zip	Country	Zip	Country		of Status Desire		3.75 Add	litional	
	6. Name and Address of Current	Registered Agent		7. Name and	Address of Ne	v Registered Age	e Requirer	<u> </u>	
			Name						
ADAMO, JOSEPH J 11303 REDGATE STREET SPRING HILL, FL 34609			Street Ac	Street Address (P.O. Box Number is Not Acceptable)					
							- :		
			City		FL Zip Code				
	e named entity submits this statement for tions of registered agent.	or the purpose of changing its re	egistered office or	registered agent, or both	n, in the State of	Florida. I am fam	niliar with,	and accept	
SIGNATURE									
	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: I	Registered Agent signatu	re required when reinstating)		DATE			
	Filing Fee Is \$61.25	A P Flection Came	azion Financino	\$5.00 May Be Added to Fees	; F	Make check p			
10.	Filing Fee Is \$61.25	S / Q / O S Trust Fund Co	azion Financino	\$5.00 May Be Added to Fees	F	Make check p	ent of St	tate	
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I hereby certify that the information supplied with this filling does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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