

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008625

FILED
Jan 28, 2004
Secretary of State**Entity Name:** INTERFAITH UNIVERSAL CHURCH, INC.**Current Principal Place of Business:**8330 CIVIC DRIVE
PORT RICHEY, FL 34668**New Principal Place of Business:****Current Mailing Address:**2699 SEVILLE BLVD.
SUITE 701
CLEARWATER, FL 33764**New Mailing Address:****FEI Number:** 20-0276529**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ROBINSON, MARY A
2699 SEVILLE BLVD.
SUITE 701
CLEARWATER, FL 33764**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: DP () Delete
Name: BLEVINS, DOUGLAS D
Address: 6496 CEDAR MOUNTAIN ROAD
City-St-Zip: DOUGLASVILLE, GA 30134

Title: DV () Delete
Name: ROBINSON, DONALD E
Address: 31700 MADISON AVE.
City-St-Zip: MADISON HEIGHTS, MI 48071

Title: DS () Delete
Name: ROBINSON, MARY A
Address: 2699 SEVILLE BLVD. SUITE 701
City-St-Zip: CLEARWATER, FL 33764

Title: DT () Delete
Name: BELL, JENNIFER L
Address: 6496 CEDAR MOUNTAIN ROAD
City-St-Zip: DOUGLASVILLE, GA 30134

Title: D () Delete
Name: HARRISON, KERI K
Address: 2699 SEVILLE BLVD. SUITE 701
City-St-Zip: CLEARWATER, FL 33764

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: BLEVINS, DOUGLAS D
Address: 6496 CEDAR MOUNTAIN ROAD
City-St-Zip: DOUGLASVILLE, GA 30134

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

Title: DP (X) Change () Addition
Name: ROBINSON, MARY A
Address: 2699 SEVILLE BLVD. SUITE 701
City-St-Zip: CLEARWATER, FL 33764

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

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

Title: D () Change (X) Addition
Name: CLIFFORD, SHERYL
Address: 16 CYPRESS DRIVE
City-St-Zip: PALM HARBOR, FL 34684

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: MARY A. ROBINSON

DP

01/28/2004

Electronic Signature of Signing Officer or Director

Date