

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001558

FILED  
Apr 19, 2006  
Secretary of State

**Entity Name:** CHURCH OF GOD (UNIVERSAL) MIAMI, FLORIDA, INC

**Current Principal Place of Business:**

15850 NORTH MIAMI AVENUE  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

15850 NORTH MIAMI AVENUE  
MIAMI, FL 33169

**New Mailing Address:**

**FEI Number:** 20-0883971

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CONNOR, JOHN E  
15850 NORTH MIAMI AVENUE  
MIAMI, FL 33169 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: D ( ) Delete  
Name: JEFFRIES, GARRY  
Address: 15850 NORTH MIAMI AVENUE  
City-St-Zip: NORTH MIAMI, FL 33169

Title: D ( ) Delete  
Name: CONNORS, JOHN  
Address: 15850 NORTH MIAMI AVENUE  
City-St-Zip: NORTH MIAMI, FL 33169

Title: D ( ) Delete  
Name: COLON, JOSE  
Address: 608 N E 139TH STREET  
City-St-Zip: NORTH MIAMI, FL 33169

Title: D ( ) Delete  
Name: HALL, MIRIAM  
Address: 1026 NORTHWEST 95TH TERRACE  
City-St-Zip: MIAMI, FL 33150

Title: D (X) Delete  
Name: LAING-HALL, DALE  
Address: 12955 NORTHEAST 6TH AVENUE #20  
City-St-Zip: NORTH MIAMI, FL 33161

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: CONNOR, JOHN  
Address: 15850 NORTH MIAMI AVENUE  
City-St-Zip: NORTH MIAMI, FL 33169

Title: D (X) Change ( ) Addition  
Name: COOPER, MARCIA A  
Address: 870 N E 129 STREET  
City-St-Zip: MIAMI, FL 33161 US

Title: D (X) Change ( ) Addition  
Name: GORDON, MARYLEN S  
Address: 209 NW 8 AVENUE # 201  
City-St-Zip: HALLANDALE BEACH, FL 33009 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHNECONNOR

D

04/19/2006

Electronic Signature of Signing Officer or Director

Date