

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010610

FILED
Sep 02, 2007
Secretary of State

Entity Name: UNIVERSAL FAITH MINISTRIES INC.

Current Principal Place of Business:

619 NE 1ST ST.
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

619 NE 1ST ST.
GAINESVILLE, FL 32601

New Mailing Address:

119 N MAIN STREET.
GAINESVILLE, FL 32601

FEI Number: 16-1737565 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ARMSTRONG, GREGORY
619 NE 1ST ST.
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

ARMSTRONG, GREGORY
119 N MAIN STREET.
GAINESVILLE, FL 32601 US

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: _____

09/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ARMSTRONG, GREGORY
Address: 126 NE 48 TERRACE
City-St-Zip: GAINESVILLE, FL 32641

Title: D () Delete
Name: ARMSTRONG, JEANNETTE
Address: 126 NE 48 TERRACE
City-St-Zip: GAINESVILLE, FL 32641

Title: D () Delete
Name: JOHNSON, DAISY
Address: 5418 NW 20 CT.
City-St-Zip: GAINESVILLE, FL 32653

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:

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: JEANNETTE ARMSTRONG

DIRE

09/02/2007

Electronic Signature of Signing Officer or Director

Date