

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003357

FILED  
Mar 19, 2012  
Secretary of State

**Entity Name:** FIVE FOLD UNIVERSAL MINISTRIES, INC.

**Current Principal Place of Business:**

1131 ENCHANTED DRIVE  
LAKELAND, FL 1

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 93187  
LAKELAND, FL 33804

**New Mailing Address:**

**FEI Number:** 80-0200657

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUTLER, PEARLIE  
1131 ENCHANTED DRIVE  
LAKELAND, FL 33801 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  
Name: BUTLER, PEARLIE  
Address: 26615 SW 137 CT  
City-St-Zip: HOMESTEAD, FL 33032

Title: V  
Name: WILSON, MARTHA  
Address: 1131 ENCHANTED DRIVE  
City-St-Zip: LAKELAND, FL 33801

Title: T  
Name: RICHARDS, CHOKO  
Address: 5000 S. HIMES APT. 138  
City-St-Zip: TAMPA, FL 33611 36

I hereby 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 all other like empowered.

SIGNATURE: PEARLIE BUTLER

PAST

03/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date