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FILED

Feb 07 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # N33399 (9)**

1. Corporation Name

UNIVERSAL CHURCH OF THE HOLY SPIRIT, INC.

Principal Place of Business

**4450 GULF OF MEXICO DRIVE
LONGBOAT KEY FL 34228**

Mailing Address

**4450 GULF OF MEXICO DRIVE
LONGBOAT KEY FL 34228-2404**3. Date Incorporated or Qualified
07/24/19893a. Date of Last Report
01/26/1996

4. FEI Number

65-0148380

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00 May Be
Added to Fees**8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

Zip

Country

29**30**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KRAUSE, GEORGE
4454 GULF OF MEXICO DRIVE
LONGBOAT KEY FL 34228**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETENAME **KRAUSE, GEORGE**
STREET ADDRESS **4454 GULF OF MEXICO DR.**
CITY-ST-ZIP **LONGBOAT KEY FL 34228**TITLE **DV** ☐ DELETENAME **LONG, JANE**
STREET ADDRESS **1229 61ST AVE., EAST**
CITY-ST-ZIP **BRADENTON FL 34203**TITLE **TD** ☐ DELETENAME **KRAUSE, MILDRED**
STREET ADDRESS **4454 GULF OF MEXICO DRIVE**
CITY-ST-ZIP **LONGBOAT KEY FL 34228**TITLE **DS** ☐ DELETENAME **BAILEY, JANET**
STREET ADDRESS **RT. 1 BOX 683R**
CITY-ST-ZIP **MYAKKA CITY FL 34251**TITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE KRAUSE**2-2-97****941-383-2126**

Date

Daytime Phone # **0062643**

P2E037 (9/96)