

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90485 001 *****8.75
 02-25-2002 90485 002 *****61.25

DOCUMENT # N94000005294

1. Entity Name

**UNIVERSAL TRUTH COMMUNITY DEVELOPMENT CORPORATIO
 N**

Principal Place of Business

Mailing Address

21310 NW 37TH AVE
 MIAMI FL 33056
 US

21310 NW 37TH AVE
 MIAMI FL 33056
 US

14040



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0530891

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TUMPKIN, MARY A
21370 NW 37TH AVE
MIAMI FL 33056

Name

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

City

FL

Zip Code

8. 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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** Delete
 NAME **TUMPKIN, MARY A**
 STREET ADDRESS **13201 NW 29TH AVE**
 CITY-ST-ZIP **OPA LOCKA FL**

TITLE **Director** Change Addition
 NAME **Chester Bishop**
 STREET ADDRESS **11301 NW 26 St. Plantation, FL**
 CITY-ST-ZIP

TITLE **SD** Delete
 NAME **KERSON, BERNICE**
 STREET ADDRESS **3734 N.W. 213TH ST**
 CITY-ST-ZIP **CAROL CITY FL**

TITLE **Director** Change Addition
 NAME **Robin Holley**
 STREET ADDRESS **8201 N University Drive,**
 CITY-ST-ZIP **Tamarac, FL**

TITLE **VPD** Delete
 NAME **FLEMMING, JOHN**
 STREET ADDRESS **14421 POLK STREET**
 CITY-ST-ZIP **MIAMI FL**

TITLE **TD** Change Addition
 NAME **Larry Spring**
 STREET ADDRESS **7805 Camino Real H201**
 CITY-ST-ZIP **Miami, FL**

TITLE **TD** Delete
 NAME **HESTER, BILLY**
 STREET ADDRESS **2343 NW 52 STREET**
 CITY-ST-ZIP **MIAMI FL**

TITLE Change Addition
 NAME **Billy Hester-Director**
 STREET ADDRESS **2343 NW 52 Street**
 CITY-ST-ZIP **Miami, FL**

TITLE **D** Delete
 NAME **ADAMS, JOHNNIE**
 STREET ADDRESS **15961 SW 3RD STREET**
 CITY-ST-ZIP **PEMBROKE PINES FL**

TITLE **Director** Change Addition
 NAME **Monica Kennerly**
 STREET ADDRESS **3901 E. lake Rd**
 CITY-ST-ZIP **Miramar, FL**

TITLE **D** Delete
 NAME **HICKS, HAROLD**
 STREET ADDRESS **7801 NE 4TH COURT**
 CITY-ST-ZIP **MIAMI FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other fee empowered.

SIGNATURE:

Mary A Tumpkin

2/4/2002

(305) 624-4991

CR2E037 (9/01)