


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000118434	
1. Entity Name UNIVERSAL LOVE CHRISTIAN ACADEMY, INC.	

Principal Place of Business 20302 N.W. 28TH COURT MIAMI, FL 33056	Mailing Address 20302 N.W. 28TH COURT MIAMI, FL 33056
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04132005 No Chg-P CR2E034 (10/03)

4. FEI Number 01-0719581	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent GREEN, ALLISON 20302 N.W. 28TH COURT MIAMI, FL 33056
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**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO GREEN, ALLISON 20302 N.W. 28TH COURT MIAMI, FL 33056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GREEN, ALLISON 20302 N.W. 28TH COURT MIAMI, FL 33056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BEASLEY, VINCENT 20302 N.W. 28TH COURT MIAMI, FL 33056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DONE, DENESE 4500 N.W. 36TH STREET SUITE 407 FORT LAUDERDALE, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000321715
04/21/05-80087-020 150.00

**DO NOT WRITE
IN THIS SPACE**

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 607, 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 like empowered.

SIGNATURE: Allison Green
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/05
Date Daytime Phone #