

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753328

**Entity Name:** UNIVERSAL CHURCH OF SPIRITUAL SCIENCE,  
SPIRITUALCENTRE OF CASSADAGA, INC.

**Current Principal Place of Business:**

102 A ASPEN AVE  
ORANGE CITY, FL 32763

**Current Mailing Address:**

P.O. BOX 111  
CASSADAGA, FL 32706 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: Yes**

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

SCHMIDT, MARGARET ANN (REV)  
439 NORTH BOSTON AVE  
DELAND, FL 32724 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

|                 |                       |                 |                             |
|-----------------|-----------------------|-----------------|-----------------------------|
| Title           | DP                    | Title           | ST                          |
| Name            | SCHMIDT, MARGARET ANN | Name            | LOVE, NANCY                 |
| Address         | P.O. BOX 111          | Address         | PO BOX 275                  |
| City-State-Zip: | CASSADAGA FL 32706    | City-State-Zip: | LITTLE SWITZERLAND NC 28749 |

*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: MARGARET ANN SCHMIDT

REV.

01/11/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date