

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000006353

**FILED**  
**Mar 18, 2013**  
**Secretary of State**  
**CC7846715705**

**Entity Name:** CHURCH OF GOD AND UNIVERSAL TRUTH, INC.

**Current Principal Place of Business:**

9250 NW 17TH AVENUE  
MIAMI, FL 33147

**Current Mailing Address:**

3221 NW 191ST STREET  
MIAMI GARDENS, FL 33056

**FEI Number: 26-2929028**

**Certificate of Status Desired: No**

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

ALLEN, MARGERIE A  
2300 NW 136TH STREET  
104  
OPA LOCKA, FL 33054 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 D  
Name JEFFRIES, GARY  
Address 2228 NW 135 TERRACE  
City-State-Zip: OPA LOCKA FL 33054

Title T  
Name ALLEN, MELISA  
Address 2228 NW 135 TERRACE  
City-State-Zip: OPA LOCKA FL 33054

Title D  
Name BELCARRIS, CEDAL  
Address 5530 NW 5 COURT  
City-State-Zip: MIAMI FL 33127

Title D  
Name ROSS, JAMES JR  
Address 2300 NW 136TH STREET, APT 404  
City-State-Zip: OPA LOCKA FL 33054

Title S  
Name MORE, JONIE M  
Address 2041 NW 24TH STREET  
City-State-Zip: MIAMI FL 33142

Title D  
Name FLOWERS, LOVELEE  
Address 2169 NW 86TH TERRACE  
City-State-Zip: MIAMI FL 33147

Title PRESIDENT  
Name ALLEN, MARGERIE A  
Address 2300 NW 136TH STREET  
104  
City-State-Zip: OPA LOCKA FL 33054

*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: MARGERIE A. ALLEN**

**PRESIDENT**

**03/18/2013**

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

\_\_\_\_\_  
Date