

**2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 809568

**FILED**  
**Jun 13, 2019**  
**Secretary of State**  
**9709560290CC**

**Entity Name:** UNIVERSAL CHURCH OF THE MASTER

**Current Principal Place of Business:**

1361 S. WINCHESTER BLVD #115  
SAN JOSE, CA 95128

**Current Mailing Address:**

1361 S. WINCHESTER BLVD #115  
SAN JOSE, CA 95128 US

**FEI Number:** 94-6129988

**Certificate of Status Desired:** No

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

NOVAK, SARAH  
3700 40TH AVENUE NORTH  
SAINT PETERSBURG, FL 33714 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:** SARAH NOVAK

06/13/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name GARRY, THOMAS P  
Address 1361 S. WINCHESTER BLVD #115  
City-State-Zip: SAN JOSE CA 95128

Title TREASURER  
Name MARNEY-PETIX, JIM R  
Address 1361 S. WINCHESTER BLVD #115  
City-State-Zip: SAN JOSE CA 95128

Title TRUSTEE  
Name MILLER, KRISTOPHER  
Address 1361 S. WINCHESTER BLVD #115  
City-State-Zip: SAN JOSE CA 95128

Title SECRETARY  
Name CHRISTENSEN, DONNA F  
Address 1361 S. WINCHESTER BLVD #115  
City-State-Zip: SAN JOSE CA 95128

Title PRESIDENT  
Name AUGUSTINE, AYLEEN A DR.  
Address 1361 S. WINCHESTER BLVD #115  
City-State-Zip: SAN JOSE CA 95128

Title TRUSTEE  
Name EVERETT, SHEILA  
Address 1361 S. WINCHESTER BLVD #115  
City-State-Zip: SAN JOSE CA 95128

Title TREASURER  
Name GOTT, CORRY  
Address 1361 S. WINCHESTER BLVD #115  
City-State-Zip: SAN JOSE CA 95128

Title TRUSTEE  
Name ROGERS, LYNN  
Address 1361 S. WINCHESTER BLVD #115  
City-State-Zip: SAN JOSE CA 95128

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*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:** CHARLENE WHITACRE

**AGENT**

06/13/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           TREASURER  
Name           WONG, HELEN  
Address        1361 S. WINCHESTER BLVD #115  
City-State-Zip: SAN JOSE CA 95128

Title           OTHER  
Name           WHITACRE, CHARLENE  
Address        1361 S. WINCHESTER BLVD #115  
City-State-Zip: SAN JOSE CA 95128