



**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Crossover Community Church  
Name of Corporation

N02000007835

**DOCUMENT NUMBER:**

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Harris  
Name of Contact Person

Crossover Community Church  
Firm/Company

1235 E. Fowler Avenue  
Address

Tampa FL 33612  
City/State and Zip Code

christopher@crossoverchurch.org  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lucy Kyllonen 813 971-8887 ext.226  
Name of Contact Person at ( ) Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

