

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Feb 13, 2008  
Secretary of State

DOCUMENT# N42830

Entity Name: T. QUACKENBOS CRUSADES, INC.

**Current Principal Place of Business:**

7906 WESTMONT DR.  
FT PIERCE, FL 34951 US

**New Principal Place of Business:**

**Current Mailing Address:**

7906 WESTMONT DR  
FT PIERCE, FL 34951 US

**New Mailing Address:**

FEI Number: 65-0257331      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

TIMOTHY, QUACKENBOS - REV.  
7906 WESTMONT DR.  
FT. PIERCE, FL 34951 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: QUACKENBOS, TIMOTHY S REV.  
Address: 7906 WESTMONT DR.  
City-St-Zip: FT. PIERCE, FL 34951 US

Title: DS ( ) Delete  
Name: PARKER, CHRISTINE  
Address: 13491 ORANGE AVE  
City-St-Zip: FORT PIERCE, FL 34945

Title: D ( ) Delete  
Name: PARKER, ROY ELDER  
Address: 13491 ORANGE AVE  
City-St-Zip: FORT PIERCE, FL 34945

Title: D ( ) Delete  
Name: QUACKENBOS, RADICA  
Address: 349 SW. QUIETWOODS  
City-St-Zip: PT ST LUCIE, FL 34953 US

Title: DT ( ) Delete  
Name: BOYD, RUAL A  
Address: 9413 HORTON RD  
City-St-Zip: FORT PIERCE, FL 34945

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DS (X) Change ( ) Addition  
Name: RADICA, QUACKENBOS  
Address: 7906 WESTMONT DR  
City-St-Zip: FORT PIERCE, FL 34951

Title: D (X) Change ( ) Addition  
Name: HARRISON, EVERETT ELDER  
Address: 2796 CO RD. 110  
City-St-Zip: JACK, AL 36346

Title: D (X) Change ( ) Addition  
Name: MARGARET, HARRISON  
Address: 2796 CO RD.110  
City-St-Zip: JACK, AL 36346 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: REV. TIMOTHY QUACKENBOS SR.

PRES

02/13/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date