FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED

97 JUN 26 AM 8: 26

1. Corporation Name CrossRoads Baptist Church of Central Florida, Inc.				SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business 4005 orlandoque P.OBOX 141105 Maitland, 71 32751 Orlando, 71 32751				3. Date Incorporated or Qualified 3a. Date of Last Report
2. Principal F 21 Suite, Apt.	Place of Business	2a. Mailing Address 26 Suite, Apt. #, etc.		4. FEI Number Applied For Not Applied For Not Applicable \$8.75 Additional
City & Stat		City & State		Certificate of Status Desired Fee Required Status Desired Fee Required Status Desired Fee Required Status Desired Fee Required Added to Fees
Zıp 24	Country 25 9. Name and Address of Current	Zip 29	Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yos No 10. Name and Address of New Registered Agent
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. I am familiar with and accept the obligations of Section 617.0503. Florida Statutes.				ess (P.O. Box Number is Not Acceptable) 95 Arbutus LN nter Park 7 32-792 FL 85 Zip Code 32-792 roration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered an N. Mittett June 26, 1996 ed when renetating) DATE
12.	Signature, typed or privide name of registated agen OFFICERS AND		Registered Agent signature require 13.	ed when renstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THTLE NAME STREET ADDRESS	PD millett, 1 4005 orlando A	y land. Rev	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	Mailland, 71 Vo Dizon steve Yous drando, #Ve	DELETE	1 4 CITY- ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP	Maitland, +1 33 SO Handy Sean 4005 orlandonve Maitland, 71 327	DELETE	2 4 C/TY - ST - Z/P 31 TITLE 32 NAME 33 STREET ADDRESS 34 C/TY - ST - Z/P	-06/26/9701003003 -06/26/9701003003 *****70.00 ******70.00
TITLE NAME STREET ADORESS CITY-ST-ZIP	SHick, Bud 4005 of lando A		4 1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	□ Change □ Addition □ Addition □ Change □ Addition □ A
TITLE NAME STREET ADDRESS CITY-ST-ZIP	millett, matthew 4005 orlandop 1 maitland, 21	DELETE H. 18. 3.2851	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 City-St-Zip	☐ Change ☐ Addilion
TITLE NAME STREET ADDRESS CITY-ST-ZIP	7-1	DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition
14. I do herel	on indicated on this annual report or su	pplemental annual report is tri	for the exemption stated ue and accurate and that	in Section 119.07(3)(i), Florida Statutes I further certify that the my signature shall have the same logal effect as if made under eath; that it is required by Chapter 617. Florida Statutes: and that my name

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

N Willett Rev Kylan NMillett June 26, 1997 6734726

DORPRINTED NAME OF BUSINESS OF DIRECTOR