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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000000796

1. Corporation Name
CROSSROADS CHRISTIAN SCHOOL, INC.

Principal Place of Business	Mailing Address
771 GOLDEN COURT CRESTVIEW FL 32539	771 GOLDEN COURT CRESTVIEW FL 32539

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed
21 5881 Bush Road	26 5881 Bush Road	02/10/1998
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-3492117 ☐ Applied For ☐ Not Applicable
City & State 23 Baker, Florida	City & State 28 Baker, Florida	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 32531 25	Zip / Country 29 32531 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

CHATTERTON, ALLEN W
771 GOLDEN COURT
CRESTVIEW FL 32539

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable) 5881 Bush Road

83

84 City Baker FL 85 Zip Code 32531

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☑ Change ☐ Addition
NAME	CHATTERTON, ALLEN W		1.2 NAME		
STREET ADDRESS	771 GOLDEN COURT		1.3 STREET ADDRESS	5881 Bush Road	
CITY-ST-ZIP	CRESTVIEW FL 32539		1.4 CITY-ST-ZIP	Baker, Fl 32531	
TITLE	D	☐ DELETE	2.1 TITLE		☑ Change ☐ Addition
NAME	CHATTERTON, DOROTHY J		2.2 NAME		
STREET ADDRESS	771 GOLDEN COURT		2.3 STREET ADDRESS	5881 Bush Road	
CITY-ST-ZIP	CRESTVIEW FL 32539		2.4 CITY-ST-ZIP	Baker, Fl 32531	
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	WILLIAMS, LAURA J		3.2 NAME		
STREET ADDRESS	1601 ROCHELLE STREET		3.3 STREET ADDRESS		
CITY-ST-ZIP	MOBILE AL 36663		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ~~Dorothy Chatterton~~ SIGNATURE REQUIRED — 3/29/99 — 850-537-7543
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
~~Director~~ Vice President Director

CR2E037-(11/98)