

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000037296
 1. Entity Name
STRATEGIC CROSSING CORPORATION



Principal Place of Business: **17 WEST CEDAR STREET SUITE 3 PENSACOLA, FL 32501**
 Mailing Address: **PO BOX 12725 PENSACOLA, FL 32501**



03222006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number: **59-3507139** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
BOOKMAN, ALAN B
30 SOUTH SPRING STREET
PENSACOLA, FL 32501

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000481363
 04/11/06-80028-011 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SPENCER, BRIAN K
STREET ADDRESS	17 E. MAIN ST, SUITE 100
CITY-ST-ZIP	PENSACOLA, FL 32501
TITLE	D
NAME	NASH, NEAL B
STREET ADDRESS	6565 NORTH W STREET SUITE 260
CITY-ST-ZIP	PENSACOLA, FL 32505
TITLE	D
NAME	CARR, JOHN S
STREET ADDRESS	17 W CEDAR STREET SUITE 3
CITY-ST-ZIP	PENSACOLA, FL 32501
TITLE	D
NAME	NICKELSEN, ERIC
STREET ADDRESS	3410 NORTH 18TH AVENUE
CITY-ST-ZIP	PENSACOLA, FL 32503
TITLE	D
NAME	CHADBOURNE, EDWARD M
STREET ADDRESS	17 WEST CEDAR STREET SUITE 3
CITY-ST-ZIP	PENSACOLA, FL 32501
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **NEAL NASH** 3-23-06 850-429-8640