2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N01000001192

Entity Name: CROSS INTERNATIONAL, INC.

Current Principal Place of Business:

600 SW 3 STREET, SUITE 2201 POMPANO BEACH. FL 33060

Current Mailing Address:

C/O CHARLES H. NAVE, P.C. 316 MOUNTAIN AVENUE SW ROANOKE, VA 24016 US

FEI Number: 65-1086387 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 600 SW 3RD STREET, SUITE 2201 POMPANO BEACH, FL 33060 US

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: CHARLES NAVE 11/16/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR Title CHAIRMAN

 Name
 WHITE, JOE DR
 Name
 DODD, REV. JIMMY

 Address
 600 SW 3 ST STE 2201
 Address
 PO BOX 850333

City-State-Zip: POMPANO BEACH FL 33060 City-State-Zip: SHAWNEE MISSION KS 66201

Title REGISTRATION COUNSEL Title DIRECTOR

Name NAVE, CHARLES Name WALTON, WILL

Address C/O CHARLES H. NAVE, P.C. Address 600 SW 3 STREET, SUITE 2201

316 MOUNTAIN AVENUE SW City-State-Zip: POMPANO BEACH FL 33060

City-State-Zip: ROANOKE VA 24016

Title DIRECTOR

Title PRESIDENT Name BORNE, DARRELL Name MILLER, KELLY

Address 600 SW 3RD STREET, STE. 2201

Address 600 SW 3RD STREET, STE. 2201

City-State-Zip: POMPANO BEACH FL 33060

City-State-Zip: POMPANO BEACH FL 33060

Title DIRECTOR

Name MONTONEY, MARK
Name EISSEY, MICHAEL

Address 600 SW 3RD STREET, STE. 2201

City-State-Zip: POMPANO BEACH FL 33060

City-State-Zip: POMPANO BEACH FL 33060

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I hereby 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 all other like empowered.

SIGNATURE: CARMEN FERNANDEZ EXECUTIVE ASSISTANT 11/16/2020

Electronic Signature of Signing Officer/Director Detail

Date

FILED Nov 16, 2020

Secretary of State 0780826408CC

Officer/Director Detail Continued:

Title DIRECTOR

Name WADE, CEDRIC

Address 600 SW 3RD STREET, STE. 2201

City-State-Zip: POMPANO BEACH FL 33060

Title OTHER

Name FERNANDEZ, CARMEN

Address 600 SW 3 STREET, SUITE 2201

City-State-Zip: POMPANO BEACH FL 33060

Title CFO

Name FOSTER-BRANCH, LENORA

Address 600 SW 3 STREET, SUITE 2201

City-State-Zip: POMPANO BEACH FL 33060