

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000001192

**FILED**  
**Mar 18, 2014**  
**Secretary of State**  
**CC5248572474**

**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.  
333 CHURCH AVENUE SW  
ROANOKE, VA 24016 US

**FEI Number:** 65-1086387

**Certificate of Status Desired:** No

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

MARIN, MARIANA  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name BROWN, JIM  
Address 600 SW 3 ST STE 2201  
City-State-Zip: POMPANO BEACH FL 33060

Title PD  
Name CAVNAR, JAMES J  
Address 600 SW 3 ST STE 2201  
City-State-Zip: POMPANO BEACH FL 33060

Title SD  
Name WHITE, JOE DR  
Address 600 SW 3 ST STE 2201  
City-State-Zip: POMPANO BEACH FL 33060

Title D  
Name DODD, REV. JIMMY  
Address PO BOX 850333  
City-State-Zip: SHAWNEE MISSION KS 66201

Title D  
Name HARVEY, CLARENCE  
Address 2077 E. HOUGHTON LAKE DR.  
City-State-Zip: HOUGHTON LAKE MI 48629

Title D  
Name BROWN, LINDA  
Address 600 SW 3RD STREET  
SUITE 2201  
City-State-Zip: POMPANO BEACH FL 33060-9000

Title CONTROLLER  
Name HOY, TIMOTHY  
Address 600 SW 3 STREET, SUITE 2201  
City-State-Zip: POMPANO BEACH FL 33060

Title CFO  
Name CROW, WADE  
Address 600 SW 3 STREET, SUITE 2201  
City-State-Zip: POMPANO BEACH FL 33060

*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:** JAMES CAVNAR

**PRESIDENT/SPECIAL  
DIRECTOR**

**03/18/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date