

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000003398

Entity Name: CROSS MISSION CENTER INC.

Current Principal Place of Business:

4841 EVERHART DRIVE
LAND O LAKES, FL 34639

Current Mailing Address:

4841 EVERHART DRIVE
LAND O LAKES, FL 34639 US

FEI Number: 47-3201217

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MYRTHIL, LUBY ESQ
1936 W DR MARTIN LUTHER KING BLVD STE 102
TAMPA, FL 33607 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 DP
Name POWELL, VIOLET
Address 4841 EVERHART DRIVE
City-State-Zip: LAND O LAKES FL 34639

Title DT
Name MONIELLO, CYCNTHIA
Address 28826 RAINDANCE AVE
City-State-Zip: WESLEY CHAPEL FL 33543

Title D
Name CLEMENT, WESTON
Address 1560 DOUGLAS AVE
City-State-Zip: DUNEDIN FL 34698

Title DVP
Name POWELL-HOLLOMAN, KATRINA
Address 4600 TAILFEATHER COURT
City-State-Zip: LAND O LAKES FL 34639

Title DS
Name WATSON, REBECCA
Address 4702 SERENA DRIVE
City-State-Zip: TAMPA FL 33617

Title D
Name SEANOVA, PORTIA
Address 19013 SUNLAKE BLVD
City-State-Zip: LUTZ FL 33558

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: VIOLET POWELL

PRESIDENT

04/10/2017

Electronic Signature of Signing Officer/Director Detail

Date