

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000002393

**FILED**  
**Apr 23, 2013**  
**Secretary of State**  
**CC2075162439**

**Entity Name:** CROSSROADS BAPTIST CHURCH OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

414 RIDGE ROAD  
FERN PARK, FL 32730

**Current Mailing Address:**

414 RIDGE ROAD  
FERN PARK, FL 32730 US

**FEI Number: 59-3376034**

**Certificate of Status Desired: No**

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

CAMPBELL, S. KEVIN  
414 RIDGE ROAD  
FERN PARK, FL 32730 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            TR  
Name            LANCASTER, WILLIAM TSR  
Address        414 RIDGE ROAD.  
City-State-Zip: FERN PARK FL 32730

Title            TD  
Name            RUPE, CHESTER  
Address        414 RIDGE ROAD  
City-State-Zip: FERN PARK FL 32730

Title            D  
Name            IRIZARRY, RUBEN  
Address        414 RIDGE ROAD  
City-State-Zip: FERN PARK FL 32730

Title            PD  
Name            CAMPBELL, S. KEVIN  
Address        414 RIDGE ROAD  
City-State-Zip: FERN PARK FL 32730

*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: S. KEVIN CAMPBELL**

**PRESIDENT**

**04/23/2013**

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

\_\_\_\_\_  
Date