

2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 831278

Entity Name: CAMPUS CRUSADE FOR CHRIST, INC.

Current Principal Place of Business:

GENERAL COUNSEL'S OFFICE
100 LAKE HART DRIVE 3500
ORLANDO, FL 32832

FILED
Apr 10, 2023
Secretary of State
4528857445CC

Current Mailing Address:

ATTN: GENERAL COUNSEL'S OFFICE
100 LAKE HART DRIVE 3500
ORLANDO, FL 32832 US

FEI Number: 95-6006173

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 CHAIRMAN, DIRECTOR
Name CANNADA, R. BARRY
Address ATTN: GENERAL COUNSEL'S OFFICE
100 LAKE HART DRIVE 3500
City-State-Zip: ORLANDO FL 32832

Title PRESIDENT, DIRECTOR
Name SELLERS, STEVEN C.
Address ATTN: GENERAL COUNSEL'S OFFICE
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City-State-Zip: ORLANDO FL 32832

Title CFO, ASSISTANT SECRETARY
Name TJERNAGEL, MARK D.
Address ATTN: GENERAL COUNSEL'S OFFICE
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City-State-Zip: ORLANDO FL 32832

Title CONTROLLER
Name HERR, KENT
Address ATTN: GENERAL COUNSEL'S OFFICE
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City-State-Zip: ORLANDO FL 32832

Title S
Name BOUCHARD, BARBARA
Address ATTN: GENERAL COUNSEL'S OFFICE
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City-State-Zip: ORLANDO FL 32832

Title VP
Name ADADEVOH, DELANYO T
Address ATTN: GENERAL COUNSEL'S OFFICE
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City-State-Zip: ORLANDO FL 32832

Title VP
Name BUCSYNZKI, ANDREA M.
Address ATTN: GENERAL COUNSEL'S OFFICE
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City-State-Zip: ORLANDO FL 32832

Title VP
Name BUTZ, ERIK
Address ATTN: GENERAL COUNSEL'S OFFICE
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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: BARBARA BOUCHARD

SECRETARY

04/10/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name ESHLEMAN, PAUL
Address ATTN: GENERAL COUNSEL'S OFFICE
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City-State-Zip: ORLANDO FL 32832

Title VP
Name SHELDON, HOLLY
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Title D
Name LIUSON, ANDREW I.
Address ATTN: GENERAL COUNSEL'S OFFICE
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Title DIRECTOR
Name GUCKENBERGER, BETH A
Address ATTN: GENERAL COUNSEL'S OFFICE
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Title VP
Name BOYD, CHERYL
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Title VP
Name GARCIA, JAVIER
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Title VP
Name MARIN, OLIVER
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Title VP
Name PARK, SUNG MIN
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Title DIRECTOR
Name HENSLEY, CURTIS SCOTT
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Title DIRECTOR
Name TEGMAN, JACINTA

Title VP
Name SHANKO, BEKELE
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Title D
Name LEIMGRUBER, JEFFREY A.
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Title D
Name WILSON, C. KEMMONS JR.
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Title VP
Name GAUTHIER, MARK A
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Title VP
Name BEYAR, LORI
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Title VP
Name KATSANDE, FARAI
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Title VP
Name MORIES, AZIZ
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Title VP
Name UY, CHRISTOPHER MONTENEGRO
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Title DIRECTOR
Name LAM, SAMUEL MONG DIG
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City-State-Zip: ORLANDO FL 32832

Title VP
Name NEWELL, JOSHUA

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