

2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000001114

**FILED
Apr 18, 2014
Secretary of State
CC7302755477**

Entity Name: THE COMMUNITY OF THE CRUCIFIED ONE, INCORPORATED

Current Principal Place of Business:

9280 NW 21ST MANOR
9280
SUNRISE, FL 33322

Current Mailing Address:

9280 NW 21ST MANOR
9280
SUNRISE, FL 33322 UN

FEI Number: 25-1303557

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BENJAMIN, LEO
9280 NW 21ST MANOR
SUNRISE, FL 33322 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 PC
Name STEWART, JONATHAN MESQ
Address 105 EAST 11TH AVENUE
City-State-Zip: HOMESTEAD PA 15120

Title SD
Name BUZZELLI, JAMES
Address 506 WYLIE AVENUE
City-State-Zip: CLAIRTON PA 15025

Title D
Name SCANLON, JAMES
Address 175 WHITE PLAINS ROAD
City-State-Zip: TRUMBULL CT 06611

Title T
Name ORDOS, JAY
Address 18590 CONNEAUTVILLE ROAD
City-State-Zip: CONNEAUTVILLE PA 16406

Title PASTOR
Name BENJAMIN, LEO J
Address 9280 NW 21ST MANOR
City-State-Zip: SUNRISE FL 33322

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: LEO BENJAMIN

PASTOR

04/18/2014

Electronic Signature of Signing Officer/Director Detail

Date