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.

PASTOR

SIGNATURE: LEO J BENJAMIN

Electronic Signature of Signing Officer/Director Detail

2013 FOREIGN NOT	FOR PROFIT COP	RPORATION ANNUAL REPO)RT

DOCUMENT# F10000001114

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

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

Officer/Director Detail :

Title	PC	Title	SD
Name	STEWART, JONATHAN MESQ	Name	BUZZELLI, JAMES
Address	105 EAST 11TH AVENUE	Address	506 WYLIE AVENUE
City-State-Zip:	HOMESTEAD PA 15120	City-State-Zip:	CLAIRTON PA 15025
Title	D	Title	т
Name	SCANLON, JAMES	Name	ORDOS, JAY
Address	175 WHITE PLAINS ROAD	Address	18590 CONNEAUTVILLE ROAD
City-State-Zip:	TRUMBULL CT 06611	City-State-Zip:	CONNEAUTVILLE PA 16406
Title	PASTOR		
Name	BENJAMIN, LEO J		
Address	9280 NW 21ST MANOR		
City-State-Zip:	SUNRISE FL 33322		

FILED Jan 24, 2013 Secretary of State CC4531970465

Certificate of Status Desired: Yes

01/24/2013

Date