#### **2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000003223

Entity Name: CAMPUS CRUSADE FOR CHRIST INTERNATIONAL, INC.

FILED
Jan 29, 2024
Secretary of State
6430880964CC

## **Current Principal Place of Business:**

100 LAKE HART DRIVE MC 3500 ORLANDO. FL 32832

## **Current Mailing Address:**

100 LAKE HART DRIVE MC 3500 ORLANDO, FL 32832 US

FEI Number: 33-0863088 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	SECRETARY	Title	DIRECTOR, CHAIRMAN
Name	BOUCHARD, BARBARA	Name	CANNADA, R. BARRY
Address	100 LAKE HART DRIVE MC 3500	Address	100 LAKE HART DR #3500

City-State-Zip: ORLANDO FL 32832 City-State-Zip: ORLANDO FL 32832

Title TREASURER, ASST. SECRETARY Title DIRECTOR

NameTJERNAGEL, MARK DNameLEIMGRUBER, JEFFREY A.Address100 LAKE HART DRIVE, MC 3500Address100 LAKE HART DR - 3500City-State-Zip:ORLANDO FL 32832City-State-Zip:ORLANDO FL 32832

Title DIRECTOR Title DIRECTOR

NameLIUSON, ANDREW I.NameWILSON, C. KEMMONS JR.Address100 LAKE HART DRIVE - 3500Address100 LAKE HART DR - 3500City-State-Zip:ORLANDO FL 32832City-State-Zip:ORLANDO FL 32832

Title DIRECTOR, PRESIDENT Title DIRECTOR

Name SELLERS, STEVEN C. Name GUCKENBERGER, BETH

Address 100 LAKE HART DRIVE MC 3500 Address 100 LAKE HART DR - 3500

City-State-Zip: ORLANDO FL 32832 City-State-Zip: ORLANDO FL 32832

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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 01/29/2024

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title VP Title DIRECTOR

Name ADADEVOH, DELANYO T. Name LAM, SAMUEL MONG DIG

Address 100 LAKE HART DRIVE MC 3500 Address 100 LAKE HART DRIVE MC 3500

**DIRECTOR** 

City-State-Zip: ORLANDO FL 32832 City-State-Zip: ORLANDO FL 32832

Title DIRECTOR Title

Name HENSLEY, CURTIS SCOTT Name TEGMAN, JACINTA

Address 100 LAKE HART DRIVE MC 3500 Address 100 LAKE HART DRIVE-3500

City-State-Zip: ORLANDO FL 32832 City-State-Zip: ORLANDO FL 32832