NORTH PALM BCH, FL 33408 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:

801 US HWY 1

Electronic Signature of Registered Agent

Officer/Director Detail :

DOCUMENT# F22000003179

Current Mailing Address: 4350 WESTMONT DR

FEI Number: 41-0692230

CHARLOTTE. NC 28217 US

CORPORATE CREATIONS NETWORK INC.

4350 WESTMONT DR CHARLOTTE. NC 28217

Current Principal Place of Business:

Onioch/Dires			
Title	P	Title	VC
Name	GRAHAM, FRANKLIN	Name	GRAHAM, WILL
Address	801 BAMBOO RD	Address	1 PORTERS COVE RD
City-State-Zip:	BOONE NC 28607	City-State-Zip:	ASHEVILLE NC 28815
Title	CEC	Title	SEC
Name	GRAHAM, MELVIN	Name	ALLEN, DANIEL
Address	3550 GOVERNOR'S LANE	Address	1 BILLY GRAHAM PKWY
City-State-Zip:	CHARLOTTE NC 28211	City-State-Zip:	CHARLOTTE NC 28201
Title	т	Title	ASST T
Name	PAULS, WILLIAM	Name	HODGES, THOMAS
Address	26 SUNSET DRIVE	Address	2601 HOLMVIEW STREET
City-State-Zip:	CHERRY HILLS VILLAGE CO 80110	City-State-Zip:	WAXHAW NC 28173
Title	DIRECTOR	Title	DIRECTOR
Name	BARUN, KEN	Name	BRUCE, DAVID
Address	1 BILLY GRAHAM PARKWAY	Address	1 BILLY GRAHAM PARKWAY
City-State-Zip:		City-State-Zip:	CHARLOTTE NC 28201
			_

Continues on page 2

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: DANIEL C. ALLEN

SECRETARY

06/20/2023 Date

Electronic Signature of Signing Officer/Director Detail

Date

Certificate of Status Desired: No

0061600249CC

2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE CROSS FUND FL CORPORATION

Name and Address of Current Registered Agent:

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	GRAHAM, ROY	Name	HARRISON, FRANK
Address	1 BILLY GRAHAM PARKWAY	Address	1 BILLY GRAHAM PARKWAY
City-State-Zip:	CHARLOTTE NC 28201	City-State-Zip:	CHARLOTTE NC 28201
Title	DIRECTOR	Title	DIRECTOR
Name	LAURIE, GREG	Name	LOTZ, ANNE GRAHAM
Address	1 BILLY GRAHAM PARKWAY	Address	1 BILLY GRAHAM PARKWAY
City-State-Zip:	CHARLOTTE NC 28201	City-State-Zip:	CHARLOTTE NC 28201
Title	DIRECTOR	Title	DIRECTOR
Title Name	DIRECTOR PAULS, BRIAN	Title Name	DIRECTOR SABER, PAUL
Name	PAULS, BRIAN	Name	SABER, PAUL
Name Address	PAULS, BRIAN 1 BILLY GRAHAM PARKWAY	Name Address	SABER, PAUL 1 BILLY GRAHAM PARKWAY
Name Address City-State-Zip:	PAULS, BRIAN 1 BILLY GRAHAM PARKWAY CHARLOTTE NC 28201	Name Address City-State-Zip:	SABER, PAUL 1 BILLY GRAHAM PARKWAY CHARLOTTE NC 28201
Name Address City-State-Zip: Title	PAULS, BRIAN 1 BILLY GRAHAM PARKWAY CHARLOTTE NC 28201 DIRECTOR	Name Address City-State-Zip: Title	SABER, PAUL 1 BILLY GRAHAM PARKWAY CHARLOTTE NC 28201 DIRECTOR
Name Address City-State-Zip: Title Name	PAULS, BRIAN 1 BILLY GRAHAM PARKWAY CHARLOTTE NC 28201 DIRECTOR WILTON, DONALD 1 BILLY GRAHAM PARKWAY	Name Address City-State-Zip: Title Name	SABER, PAUL 1 BILLY GRAHAM PARKWAY CHARLOTTE NC 28201 DIRECTOR WILLIAMS, RICHARD 14114 TIMBERGREEN DRIVE