2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

SIGNATURE:

Jan 26,-2005 08:00 AM **DOCUMENT #714986 Secretary of State** 1. Entity Name CROSSPOINTE BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 4981 - 78TH AVENUE NORTH 4981 - 78TH AVENUE NORTH PINELLAS PARK, FL 33781 US PINELLAS PARK, FL 33781 01162005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1204151 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FARRIS, EVERETT R. DO NOT WRITE 8790-58 LANE NORTH PINELLAS PARK, FL 33781 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution, Due by May 1, 2005 Added to Fees 10. OFFICERS AND DIRECTORS TITLE VD NAME LETO, CARLO STREET ADDRESS 9835 54TH STREET NORTH CITY-ST-ZIP PINELLAS PARK, FL TITLE 1:000000197504 NAME FARRIS, EVERETT, R pt. 位为/6%-3000 2-0 (3 61 . **25** STREET ADDRESS 8790 - 58TH LANE NORTH CITY-ST-ZIP PINELLAS PARK, FL TITLE NAME HOLTSCLAW, JOHN J STREET ADDRESS 610 25TH AVE N DO NOT WRITE CITY-ST-ZIP SAINT PETERSBURG, FL 33704 TITLE IN THIS SPACE NAME RICE, MICHAEL J STREET ADDRESS 13510 CORAL WAY CITY-ST-ZIP LARGO, FL 33710 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED