

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763418

FILED  
Apr 21, 2005  
Secretary of State

Entity Name: CHRIST CRUSADERS, INC.

## Current Principal Place of Business:

2527 OPA LOCKA BLVD.  
OPA LOCKA, FL 33054 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 541577  
OPA LOCKA, FL 33054 US

## New Mailing Address:

PO BOX 541496  
OPA LOCKA, FL 33054 US

FEI Number: 59-2193820

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JUANITA MINCEY  
12868 SW 21 STREET  
M  
MIAMI, FL 33054 US

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: OMANE, BISMARCK  
Address: P.O. BOX 541575  
City-St-Zip: OPA LOCKA, FL 33054

Title: PD ( ) Delete  
Name: MINCEY, JUANITA,  
Address: P.O. BOX 541575  
City-St-Zip: OPA LOCKA, FL 33054

Title: D ( ) Delete  
Name: PERKINS, MARY  
Address: 13720 NW 22 AVE  
City-St-Zip: OPA LOCKA, FL 33054

Title: SVP ( ) Delete  
Name: MILLS, DENISE MINCEY  
Address: P.O. BOX 541575  
City-St-Zip: OPA LOCKA, FL 33054

Title: D ( ) Delete  
Name: PERKINS, JAMES  
Address: 13720 N.W. 22 AVE.  
City-St-Zip: OPA LOCKA, FL 33054

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition  
Name: DIANE, CHUKWURAH  
Address: P.O. BOX 541496  
City-St-Zip: OPA LOCKA, FL 33054

Title: PD (X) Change ( ) Addition  
Name: MINCEY, JUANITA,  
Address: P.O. BOX 541496  
City-St-Zip: OPA LOCKA, FL 33054

Title: D (X) Change ( ) Addition  
Name: NEPTUNE, CAMILLE  
Address: PO BOX 541496  
City-St-Zip: OPA LOCKA, FL 33054

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: PERKINS, JAMES  
Address: POBOX 541496.  
City-St-Zip: OPA LOCKA, FL 33054

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JUANITA MINCEY

PRES

04/21/2005

Electronic Signature of Signing Officer or Director

Date