

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764895

FILED
Jan 25, 2006
Secretary of State

Entity Name: THE CROSSROADS CLUB, INC.

Current Principal Place of Business:

306 NE 2ND ST
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

306 NE 2ND ST
DELRAY BEACH, FL 33483 US

New Mailing Address:

FEI Number: 59-2224993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMSTONG, DAVID G
CHAPIN & ARMSTRONG
4600 N. OCEAN BLVD., STE. 206
BOYNTON BEACH, FL 33435 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: PD () Delete
Name: ALLERTON, GEORGE M.
Address: 102 NW 12TH ST
City-St-Zip: DELRAY BEACH, FL 33444

Title: VPD () Delete
Name: HINTZE, BRUCE
Address: 933 ALLAMANDA DR
City-St-Zip: DELRAY BEACH, FL 33483

Title: TD () Delete
Name: SHPIZ, LEO
Address: 5689 NW 24TH TERRACE
City-St-Zip: DELRAY BEACH, FL 33496

Title: SD () Delete
Name: BERNSTEIN, AMY
Address: 912 NE 8TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: SD (X) Change () Addition
Name: PALMER, LINDA
Address: 2892 S.W. 6TH STREET
City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GEORGE M. ALLERTON

PRES

01/25/2006

Electronic Signature of Signing Officer or Director

Date