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FILED
Feb 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **838822** (5)

1. Corporation Name

WORLD LITERATURE CRUSADE, INC.

Principal Place of Business

Mailing Address

**7899 LEXINGTON DR.
P. O. BOX 35830
COLORADO SPRINGS CO 80920**

**PO BOX 35930
COLORADO SPRINGS CO 80935**

3. Date Incorporated or Qualified

07/25/1977

4. FEI Number

23-7093281

Applied For

Not Applicable

2. Principal Place of Business

21
Suite, Apt. #, etc.

22
City & State

23
Zip

25
Country

2a. Mailing Address

26
Suite, Apt. #, etc.

27
City & State

28
Zip

30
Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCGEEHEE, THOMAS R.
3350 PHILLIPS HWY.
JACKSONVILLE FL 32207**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EASTMAN, DEE	1.2 NAME	
STREET ADDRESS	7899 LEXINGTON DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	COLORADO SPRINGS CO 80920	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EASTMAN, RICHARD	2.2 NAME	
STREET ADDRESS	7899 LEXINGTON DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	COLORADO SPRINGS CO 80920	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AYERS, DAVID	3.2 NAME	
STREET ADDRESS	8355 EVANGELINE ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	BEAUMONT TX 77706	3.4 CITY-ST-ZIP	
TITLE	CD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ODA, ANDY L.	4.2 NAME	
STREET ADDRESS	P.O. BOX 257 N/A	4.3 STREET ADDRESS	
CITY-ST-ZIP	OVEIDO FL 32785	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FALLENINE, BRAD	5.2 NAME	
STREET ADDRESS	7899 LEXINGTON DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	COLORADO SPRINGS CO 80920	5.4 CITY-ST-ZIP	
TITLE	VC	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCGEEHEE, THOMAS R.	6.2 NAME	
STREET ADDRESS	3350 PHILLIPS HIGHWAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32247	6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Dee Eastman* | *Dee Eastman*

2-9-98

719-260-8888

CR2E037 (10/97)