

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006501

FILED
Apr 14, 2005
Secretary of State

Entity Name: OPA-LOCKA CHRISTIAN UNIVERSITY CHRIST CRUSADERS, INC.

Current Principal Place of Business:

2527 OPA LOCKA BOULEVARD
OPA LOCKA, FL 33054

New Principal Place of Business:

P.O. BOX 8827
MIRAMAR, FL 33027

Current Mailing Address:

P O BOX 541577
OPA LOCKA, FL 33054

New Mailing Address:

P O BOX 8827
MIRAMAR, FL 33027

FEI Number: 59-2193820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MINCEY, JUANITA
12868 SW 21 STREET
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

MINCEY, JUANITA
12868 SW 21 STREET
MIRAMAR, FL 33027 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:

04/14/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

Title: SD () Delete
Name: OMANE, BISMARCK
Address: POST OFFICE BOX 541575
City-St-Zip: OPA LOCKA, FL 33054

Title: SVPD () Delete
Name: MINCEY-MILLS, DENISE M
Address: POST OFFICE BOX 541575
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MINCEY, JUANITA REV.
Address: POST OFFICE BOX 8827
City-St-Zip: MIRAMAR, FL 33027

Title: SD (X) Change () Addition
Name: SCOTT, ELIZABETH
Address: POST OFFICE BOX 8827
City-St-Zip: MIRAMAR, FL 33027

Title: SVPD (X) Change () Addition
Name: MINCEY-MILLS, DENISE M
Address: POST OFFICE BOX 8827
City-St-Zip: MIRAMAR, FL 33027

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

PD

04/14/2005

Electronic Signature of Signing Officer or Director

Date