

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007717

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: CROSS CITY MANOR, N.P. INC.

**Current Principal Place of Business:**

257 SE 45 AVE  
CROSS CITY, FL 32628

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. 2542  
CROSS CITY, FL 32628

**New Mailing Address:**

FEI Number: 59-3674105      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ADKINS, JIMMIE J  
257 S.E. 45TH AVE.  
CROSS CITY, FL 32628      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: D      ( ) Delete  
Name: ADKINS, JIMMIE J  
Address: 257 SE 45 AVE  
City-St-Zip: CROSS CITY, FL 32628

Title: D      ( ) Delete  
Name: ADKINS, VICTOR  
Address: 257 SE 45 AVE  
City-St-Zip: CROSS CITY, FL 32628

Title: D      ( ) Delete  
Name: ADKINS, NANCY  
Address: 257 SE 45 AVE  
City-St-Zip: CROSS CITY, FL 32628

**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:

I hereby certify that the information supplied with this filing does not qualify 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: JIMMIE ADKINS

D

03/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date