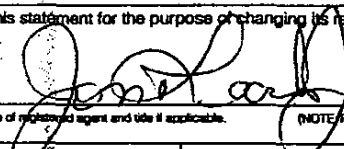


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90345 009 ****61.25

DOCUMENT # N01000008535 1. Entity Name CROSSLIGHT BAPTIST CHURCH, INC.					
Principal Place of Business 38621 CALVIN STREET ZEPHYRHILLS, FL 33541			Mailing Address 38621 CALVIN STREET P.O. Box 831 ZEPHYRHILLS, FL 33541 33539-0831		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	03162005 Chg-NP CR2E037 (10/03)	
4. FEI Number 61-1605333				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
LEACH, JR., JON T 38621 CALVIN STREET ZEPHYRHILLS, FL 33541			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  DATE 3/16/05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOYT, GENE R 7018 EL TORO STREET ZEPHYRHILLS, FL 33540 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FARRINGTON, RICHARD J 3246 OSAGE DRIVE #213 ZEPHYRHILLS, FL 33541 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	AP JOSEPH H. WILLIAMSON 110 N. RUTH AV. LAKELAND, FL 33805 Joseph H. Williamson ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BALDUS, GARY L 5239 EPPING LN ZEPHYRHILLS, FL 33541 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEACH, JR., JOHN L 38621 CALVIN STREET ZEPHYRHILLS, FL 33541 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. 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 report or supplemental 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 677, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: GENE R HOYT  03-16-05 813-715-75X3 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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