2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2004
Secretary of State

DOCUMENT# N02000003121

Entity Name: CONSTRUCTION CRUSADES, INC.

Current Principal Place of Business:

5200 BRIXTON COURT
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9847
NAPLES, FL 34101 US

New Mailing Address:

5200 BRIXTON COURT
NAPLES, FL 34104 US

FEI Number: 48-1254751 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOCUS, SHANE F
5200 BRIXTON COURT
NAPLES, FL 34104 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: NOCUS, SHANE F
Address: 5200 BRIXTON COURT
City-St-Zip: NAPLES, FL 34104

Title: D ( ) Delete
Name: SCHRAMM, DARRIN
Address: 2360 NAPLES TRACE CIRCLE, #8
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete
Name: CROUCH, MICHAEL
Address: 4538 PARROT AVENUE
City-St-Zip: NAPLES, FL 34104

Title: D ( ) Delete
Name: NOCUS, FREDERICK
Address: 719 SHADY LANE
City-St-Zip: VINCENNES, IN 47591

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

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: SHANE F. NOCUS D 05/02/2004

Electronic Signature of Signing Officer or Director Date