

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003409

FILED
Apr 26, 2005
Secretary of State

Entity Name: CRUSADERS FOR CHRIST CHURCH AT SANDERSON, INCORPORATED

Current Principal Place of Business:

CORNER OF TONY GIVENS RD & COUNTY RD 229
PO BOX 130
SANDERSON, FL 32087

New Principal Place of Business:

Current Mailing Address:

CORNER OF TONY GIVENS RD & COUNTY RD 229
PO BOX 130
SANDERSON, FL 32087

New Mailing Address:

FEI Number: 59-3745970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOLSTON, ERNEST JR
7220 NW 128TH PL
ALACHUA, FL 32616 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: P () Delete
Name: CURTIS, NATHANIEL
Address: PO BOX 1087
City-St-Zip: ALACHUA, FL 32616

Title: V () Delete
Name: FOLSTON, ERNEST JR
Address: PO BOX 1651
City-St-Zip: ALACHUA, FL 32616

Title: S () Delete
Name: CURTIS, NATRON
Address: 1310 NW 143RD ST
City-St-Zip: GAINESVILLE, FL 32606

Title: D () Delete
Name: FOLSTON, DOROTHY
Address: PO BOX 1651
City-St-Zip: ALACHUA, FL 32616

Title: D () Delete
Name: RENTZ, TARCHA
Address: 6807 NW 37TH TERR
City-St-Zip: GAINESVILLE, FL 32653

Title: D () Delete
Name: LEWIS, LEONARD
Address: PO BOX 262
City-St-Zip: SANDERSON, FL 32087

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:

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: ERNEST FOLSTON, JR.

V

04/26/2005

Electronic Signature of Signing Officer or Director

_____ Date