2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006477

FILED Apr 10, 2009 Secretary of State

DOCON	/ILIVI# 1402	200000477		Secretary or State	
Entity Na	me: FIRE OF	THE CROSS MINISTRIES, IN	C.		
Current P	rincipal Place	e of Business:	New Principal	New Principal Place of Business:	
7915 103F #153					
JACKSON	IVILLE, FL 32	210			
Current M	lailing Addre	ss:	New Mailing A	New Mailing Address:	
PO BOX 440295 JACKSONVILLE, FL 322220295			#153	7915 103RD ST #153 JACKSONVILLE, FL 32210	
FEI Number	: 01-0708449	FEI Number Applied For ()	FEI Number Not Applicabl	le () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Ado	Name and Address of New Registered Agent:	
	LELIA F RD ST. LOT 15 IVILLE, FL 32:		7915 103RD S LOT 153	HOLMAN, LELIA F 7915 103RD ST. LOT 153 JACKSONVILLE, FL 32210 US	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its re	egistered office or registered agent, or both,	
SIGNATURE:				04/10/2009	
		nic Signature of Registered Age	ent	Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/C	HANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PT (HOLMAN, LEL 7915 103RD S JACKSONVILL	T. LOT 153	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TRT (WADE, CATHY 6231 HAWKW JACKSONVILL	IND RD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	ALLEN, BISHC	ON WOOD DR.	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: LELIA HOLMAN PT 04/10/2009