

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008354

FILED
Jun 04, 2008
Secretary of State

Entity Name: CROSSPOINTE A CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

919 DEBUEL ROAD
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

919 DEBUEL ROAD
LUTZ, FL 33549

New Mailing Address:

FEI Number: 42-1531588 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PD () Delete
Name: LYON, HARVEY
Address: 919 DEBUEL ROAD
City-St-Zip: LUTZ, FL 33549

Title: TD () Delete
Name: REIBER, WILLIAM
Address: 19011 CALLAWAY CT
City-St-Zip: TAMPA, FL 33647

Title: SD () Delete
Name: FITTS, SONJA
Address: 919 DEBUEL ROAD
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: FITTS, SONJA
Address: 919 DEBUEL RD
City-St-Zip: LUTZ, FL 33549

Title: SD (X) Change () Addition
Name: MCKNIGHT, JOHN
Address: 919 DEBUEL ROAD
City-St-Zip: LUTZ, FL 33549

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: HARVEY LYON

PD

06/04/2008

Electronic Signature of Signing Officer or Director

Date