

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006860

FILED
Apr 26, 2005
Secretary of State

Entity Name: CROSSFIRE COMMUNITY FELLOWSHIP, INC.

Current Principal Place of Business:

13044 SPRING LAKE DR
COOPER CITY, FL 33330

New Principal Place of Business:

Current Mailing Address:

13044 SPRING LAKE DR
COOPER CITY, FL 33330

New Mailing Address:

FEI Number: 74-3126523

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, ANDRES
13044 SPRING LAKE DR
COOPER CITY, FL 33330 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: FERNANDEZ, ANDRES
Address: 13044 SPRING LAKE DR
City-St-Zip: COOPER CITY, FL 33330

Title: D () Delete
Name: FERNANDEZ, JANETH
Address: 13044 SPRING LAKE DR
City-St-Zip: COOPER CITY, FL 33330

Title: D () Delete
Name: MAALOUF, MICHAEL
Address: 2128 NOVA VILLAGE DR
City-St-Zip: DAVIE, FL 33317

Title: D () Delete
Name: HERAMB, MARK
Address: 11121 NW 37TH ST
City-St-Zip: SUNRISE, FL 33351

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: ANDRES FERNANDEZ

D

04/26/2005

Electronic Signature of Signing Officer or Director

Date