2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005
Secretary of State

DOCUMENT# N04000006966

Entity Name: CRUSADE FOR CHRIST, WORLD WIDE, INC.

Current Principal Place of Business:

5436 SPRINGS RUN AVE
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

5436 SPRINGS RUN AVE
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 20-1510958 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LISA, ROQUE E
5436 SPRINGS RUN AVE
ORLANDO, FL 32819 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:	LISA, ROQUE E	
Address:	5436 SPRINGS RUN AVE	
City-St-Zip:	ORLANDO, FL 32819	
Title:	VD	( ) Delete
Name:	REEVES, THOMAS W	
Address:	8750 NE 18TH ST	
City-St-Zip:	CORAL SPRINGS, FL 33071	
Title:	TD	( ) Delete
Name:	LISA, MIZUHA E	
Address:	5436 SPRINGS RUN AVE	
City-St-Zip:	ORLANDO, FL 32819	
Title:	SD	( ) Delete
Name:	OLIVEIRA, MARIA A	
Address:	7735 SUGAR BEND DR	
City-St-Zip:	ORLANDO, FL 32819	
Title:	SD	( ) Delete
Name:	MENEZES, MOACIR	
Address:	1054 BLACK ACRE TRAIL	
City-St-Zip:	WINTER SPRINGS, FL 32708	

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:	

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: ROQUE E. LISA PD 01/27/2005

Electronic Signature of Signing Officer or Director — Date