

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006966

FILED  
Mar 06, 2007  
Secretary of State

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: 2D ( ) Delete  
Name: LISA, ROQUE E  
Address: 5436 SPRINGS RUN AVE  
City-St-Zip: ORLANDO, FL 32819

Title: VD ( ) Delete  
Name: LISA, ROQUE E  
Address: 5436 SPRINGS RUN AVE  
City-St-Zip: ORLANDO, FL 32819

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: 8632 SHADY GLEN DR.  
City-St-Zip: ORLANDO, FL 32819

Title: SD ( ) Delete  
Name: MENEZES, MOACIR  
Address: 677 BARRINGTON CIRCLE  
City-St-Zip: WINTER SPRINGS, FL 32708

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: LISA, ROQUE E  
Address: 5436 SPRINGS RUN AVE  
City-St-Zip: ORLANDO, FL 32819

Title: VD (X) Change ( ) Addition  
Name: MOREIRA, JONATHAS  
Address: 524 TIMBER RIDGE DR  
City-St-Zip: LONGWOOD, FL 32779

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

Title: SD (X) Change ( ) Addition  
Name: MELLO, LILIAN F  
Address: 524 TIMBER RIDGE DR.  
City-St-Zip: LONGWOOD, FL 32779

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 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: ROQUE E. LISA

D

03/06/2007

Electronic Signature of Signing Officer or Director

Date