

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008277

FILED
May 01, 2007
Secretary of State

Entity Name: DM/41 CROSSROADS ASSOCIATION, INC.

Current Principal Place of Business:

POST OFFICE BOX 443
LAND O'LAKES, FL 34639

New Principal Place of Business:

2956 WENTWORTH WAY
TARPON SPRINGS, FL 34688

Current Mailing Address:

POST OFFICE BOX 443
LAND O'LAKES, FL 34639

New Mailing Address:

FEI Number: 20-8944332 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:

BRICKLEMYER, KEITH W ESQ.
500 E. KENNEDY BOULEVARD, SUITE 200
TAMPA, FL 33602 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: HAGMAN, BOB
Address: P.O. BOX 443
City-St-Zip: LAND O'LAKES, FL 34639

Title: D () Delete
Name: LETTS, SHANNON E
Address: 2001 SE 10TH STREET
City-St-Zip: BENTONVILLE, AR 72716

Title: D () Delete
Name: BEDARD, ROBERT M
Address: 2001 SE 10TH STREET
City-St-Zip: BENTONVILLE, AR 72716

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: KNIFF, RUSSELL E
Address: 833 KENMOOR AVE., SE
City-St-Zip: GRAND RAPIDS, MI 49546

Title: D (X) Change () Addition
Name: DRAPER, DONALD
Address: 2001 SE 10TH STREET
City-St-Zip: BENTONVILLE, AR 72716

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: BOB HAGMAN

D

05/01/2007

Electronic Signature of Signing Officer or Director

_____ Date