

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000176

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** CROSS POINTE CHURCH OCALA, INC.

**Current Principal Place of Business:**

3300 SW 34TH AVE  
SUITE 140  
OCALA, FL 34474

**New Principal Place of Business:**

3919 SE LAKE WEIR AVENUE  
OCALA, FL 34480 UN

**Current Mailing Address:**

3300 SW 34TH AVE  
SUITE 140  
OCALA, FL 34474

**New Mailing Address:**

3919 SE LAKE WEIR AVENUE  
OCALA, FL 34480 UN

**FEI Number:** 20-1727902

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TROVILLO, PHIL  
3550 SE 25TH AVE  
OCALA, FL 34471 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  
Name: GRAVES, MILTON L JR.  
Address: 2917 SE 27TH AVENUE  
City-St-Zip: OCALA, FL 34471

Title: D  
Name: WOLF, JOHN  
Address: 2214 SE 24TH AVENUE  
City-St-Zip: OCALA, FL 34471

Title: D  
Name: CLARK, SCOTT  
Address: 4928 SW 58TH PLACE  
City-St-Zip: OCALA, FL 34474

Title: D  
Name: MIROS, STEVE  
Address: 1825 SE 85TH ST RD  
City-St-Zip: OCALA, FL 34480

I hereby 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 all other like empowered.

SIGNATURE: MILTON L. GRAVES, JR.

PRES

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date