2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003268

Entity Name: CROSSROADS CHURCH OF MIAMI LAKES INC.

FILED Jan 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 378 WESTWARD DRIVE 5800 PALM AVE MIAMI SPRINGS, FL 33166 HIALEAH, FL 33012 **Current Mailing Address:** New Mailing Address: 378 WESTWARD DRIVE 5800 PALM AVE MIAMI SPRINGS, FL 33166 HIALEAH, FL 33012 FEI Number: 20-2595578 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KENT, JOSEPH L KENT, JOSEPH L 378 WESTWARD DRIVE 5800 PALM AVE MIAMI SPRINGS, FL 33166 US US HIALEAH, FL 33012 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: 01/27/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition KENT, JOSEPH L KENT, JOSEPH L Name: Name: 378 WESTWARD DRIVE Address: 5800 PALM AVE Address: City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip: HIALEAH, FL 33012 Title: () Delete Title: (X) Change () Addition CALIXTO, FRANCISCO RAMOS, ANDREA M Name: Name: Address: 378 WESTWARD DRIVE Address: 5800 PALM AVE. City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip: HIALEAH, FL 33012 Title: () Delete Title: (X) Change () Addition SOTOLONGO, TANIA ALBERT, ANELLE M Name: Name: 378 WESTWARD DRIVE 5800 PALM AVE Address: Address: City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip: HIALEAH, FL 33012 () Delete Title: VΡ Title: (X) Change () Addition RODRIGUEZ, JOSE Name: Name: MORALES, GUILLERMO J 5800 PALM AVE. Address: 378 WESTWARD DRIVE Address: City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip: HIALEAH, FL 33012 Title: () Delete Title: () Change (X) Addition ALBERT, ADAM Name: Name: 5800 PALM AVE Address: Address: City-St-Zip: City-St-Zip: HIALEAH, FL 33012 Title: () Delete Title: () Change (X) Addition CALIXTO, MARCOS Name: Name: Address: Address: 5800 PALM AVE HIALEAH, FL 33012 City-St-Zip: City-St-Zip:

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: JOSEPH L KENT P 01/27/2009