

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009194

FILED
Mar 05, 2009
Secretary of State

Entity Name: CROSSOVER FOUNDATION INTERNATIONAL, INC.

Current Principal Place of Business:

5234 RISHLEY RUN WAY
MOUNT DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

5234 RISHLEY RUN WAY
MOUNT DORA, FL 32757

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, ISABELITA M
5234 RISHLEY RUN WAY
MOUNT DORA, FL 32757 US

Name and Address of New Registered Agent:

EVANGELISTA, TERESITA P
5234 RISHLEY RUN WAY
MOUNT DORA, FL 32757 US

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: TERESITA EVANGELISTA

03/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: MARTIN, ISABELITA M
Address: 5234 RISHLEY RUN WAY
City-St-Zip: MOUNT DORA, FL 32757 US

Title: DIR (X) Delete
Name: MARTIN, ALFREDO A
Address: 5234 RISHLEY RUN WAY
City-St-Zip: MOUNT DORA, FL 32757 US

Title: DIR (X) Delete
Name: EVANGELISTA, TERESITA P
Address: 5234 RISHLEY RUN WAY
City-St-Zip: MOUNT DORA, FL 32757 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: EVANGELISTA, TERESITA P
Address: 5234 RISHLEY RUN WAY
City-St-Zip: MOUNT DORA, FL 32757 US

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 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: TERESITA EVANGELISTA

DIR

03/05/2009

Electronic Signature of Signing Officer or Director

Date