

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N18070 (5)
1. Corporation Name

CROSSROAD DECISION MINISTRY, INC.

Principal Place of Business Mailing Address
1940 S.E. 2nd Street 1940 S.E. 2nd Street
Pompano Beach, FL 33060 Pompano Beach, FL 33060

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
09-26-1986

3a. Date of Last Report
5-12-1985

4. FEI Number

59-2721174

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

Dodge, Richard W.
950 N.E. 9th Ave.
Pompano Beach, FL 33060

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD
NAME Dodge, Richard W.
STREET ADDRESS 950 N.E. 9th Ave.
CITY-ST-ZIP Pompano Beach, FL 33060

☐ DELETE

TITLE VD
NAME Dodge, Julianne T.
STREET ADDRESS 950 N.E. 9th Ave.
CITY-ST-ZIP Pompano Beach, FL 33060

☐ DELETE

TITLE D
NAME Carbulon, Regina
STREET ADDRESS 9467 N.W. 52 Manor, Sunrise, FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE SD
42 NAME Kosicki, Denise
43 STREET ADDRESS 8495 S.W. 42 Court
44 CITY-ST-ZIP Davie, FL 33328

☐ Change ☐ Addition

51 TITLE TD
52 NAME Conner, David
53 STREET ADDRESS 3060 Riverside Dr. #E-4
54 CITY-ST-ZIP Riverside Estates
Coral Springs, FL 33065

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

900001749359
-03/19/96--01078--030
***\$61.25

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 3/15/96 305 941 3055

Daytime Phone # 563-19-96

CR2E037 (12/95)