

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28159

FILED  
Mar 17, 2008  
Secretary of State

**Entity Name:** CRUSADERS FOR DELIVERANCE THROUGH CHRIST, MINISTRIES INC.

**Current Principal Place of Business:**

8881 SW 24 PLACE  
C/O CHARLES J. ELLIOTT  
MIRAMAR, FL 33025

**New Principal Place of Business:**

**Current Mailing Address:**

8881 SW 24 PLACE  
C/O CHARLES J. ELLIOTT  
MIRAMAR, FL 33025

**New Mailing Address:**

**FEI Number:** 65-0124698

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ELLIOTT, CHARLES J.  
8881 SW 24 PLACE  
MIRAMAR, FL 33025 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: DC ( ) Delete  
Name: ELLIOTT, CHARLES J.,  
Address: 8881 SW 24 PLACE  
City-St-Zip: MIRAMAR, FL

Title: DS ( ) Delete  
Name: ELLIOTT, BEVERLEY M.,  
Address: 8881 SW 24 PLACE  
City-St-Zip: MIRAMAR, FL

Title: D ( ) Delete  
Name: JONES, KENNETH  
Address: 110 SW 11ST  
City-St-Zip: HALLANDALE, FL 33009

Title: D ( ) Delete  
Name: ROLLE, STARLIN  
Address: 430 LOSLTOSWAY  
City-St-Zip: ATAMANTE SPRINGS, FL 32714

Title: D ( ) Delete  
Name: ELLIOTT, CHARLOTTE J  
Address: 8881 SW 24 PLACE  
City-St-Zip: MIRAMAR, FL 33025

Title: D ( ) Delete  
Name: BROWN, JOSH  
Address: 657 NW 5 COURT  
City-St-Zip: HALLANDALE, FL 33009

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: CHARLES ELLIOTT

RA

03/17/2008

Electronic Signature of Signing Officer or Director

Date