

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N35452

**FILED**  
**Jan 20, 2012**  
**Secretary of State**

**Entity Name:** CROSS ROADS COMMUNITY REVITALIZATION AND DEVELOPMENT, INC.

**Current Principal Place of Business:**

2410 MONTE CARLO TR.  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 555674  
ORLANDO, FL 32855 US

**New Mailing Address:**

**FEI Number:** 59-3018078

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SALTER, CLINTON L  
3464 DOMI-FITZ COURT  
ORLANDO, FL 32805 US

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

SALTER, CLINTON L  
2410 MONTE CARLO TR.  
ORLANDO, FL 32805 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: CLINTON L. SALTER

01/20/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: PAULA, FORREST D  
Address: P.O. BOX 555674  
City-St-Zip: ORLANDO, FL 32855

Title: VP  
Name: SALTER, CHARLIE J VP  
Address: 3464 DOMI-FITZ CT  
City-St-Zip: ORLANDO, FL 32805

Title: DIR  
Name: SALTER, CLINTON L  
Address: 2410 MONTE CARLO TRAIL  
City-St-Zip: ORLANDO, FL 32805

Title: DIR  
Name: NEWHOUSE, K. L  
Address: 5145 CITY STREET,BLDG.4,SUITE 308  
City-St-Zip: ORLANDO, FL 32819

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: PAULA FORREST

PRES

01/20/2012

Electronic Signature of Signing Officer or Director

Date