## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N49514

FILED Sep 25, 2008 Secretary of State

Entity Name: CROSS INTERNATIONAL FOUNDATION, INC.

**Current Principal Place of Business:** 

New Principal Place of Business:

600 SOUTHWEST 3 STREET

501 MARINE STREET SUITE #6 GRAN VISTA

**SUITE 2201** 

ST. AUGUSTINE, FL 32085 US

POMPANO BEACH, FL 33060 US

New Mailing Address:

600 SOUTHWEST 3 STREET

**Current Mailing Address:** 

501 MARINE STREET SUITE #6, GRAN VISTA

**SUITE 2201** POMPANO BEACH, FL 33060 US

ST. AUGÚSTINE, FL 32084 US

FEI Number: 59-3146876

FEI Number Not Applicable ( )

Name:

Title:

Name:

Address:

Address:

City-St-Zip:

Certificate of Status Desired ( )

FEI Number Applied For ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of New Registered Agent:

VALDES-FAULI CORPORATE SERVICES, INC.

BRENNAN, ANN M PRESIDE **501 MARINE STREET** 

777 SOUTH FLAGLER DR. SUITE 500 EAST

SUITE #6, GRAN VISTA

WEST PALM BEACH, FL 33401 US

ST. AUGÚSTINE, FL 32064 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: ANN M. BRENNAN

Name and Address of Current Registered Agent:

09/25/2008

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

BRENNAN, ANN M PD

ST. AUGUSTINE, FL 32084

BRENNAN, JOSEPH J VP

ST. AUGUSTINE, FL 32084

501 MARINE

**VP** 

(X) Change ( ) Addition

(X) Change ( ) Addition

() Change () Addition

501 MARINE STREET, SUITE #6 GRAN VISTA

( ) Delete

HODGON, ROBERT Name:

6231 ROBINSON Address:

City-St-Zip: SHAWNEE MISSION, KS 66201

Title: STD () Delete

HARVEY, CLARENCE Name: Address: 230 CHERRY GROVE

City-St-Zip: **CANTON, MI 48188** 

Title: PD (X) Delete CAVNAR, JAMES J Name:

600 SOUTHWEST 3 STREET SUITE 2201 Address: City-St-Zip: POMPANO BEACH, FL 33060

City-St-Zip: Title:

> 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: JOSEPH J. BRENNAN Electronic Signature of Signing Officer or Director 09/25/2008

Date