

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 07 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N93000005430 (4)

1. Corporation Name

CROSSROADS BAPTIST CHURCH OF FORT MYERS, INC.



Principal Place of Business

Mailing Address

4679 PALM BCH BLVD  
FT MYERS FL 33905  
USP.O. BX 1102  
FT MYERS FL 33902-1102  
US3. Date Incorporated or Qualified  
12/02/19933a. Date of Last Report  
01/26/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 P.O. BOX 50902, FT MYERS, FL

22 City &amp; State

27 City &amp; State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

65-0458377

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOVE, BILL  
11841 GRAND ISLE LANE  
FORT MYERS FL 33913

81 Name

ROGER BRADLEY

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

RT 1, BOX 1825

83

84 City

LABELLE

FL

85 Zip Code

33935

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 Roger Bradley / ROGER BRADLEY

Signature of registered agent or registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

1-30-97  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME LOVE, BILL  
STREET ADDRESS 11841 GRAND ISLE LANE  
CITY-ST-ZIP FORT MYERS FL ☒ DELETETITLE T  
NAME MCGILL, JOE  
STREET ADDRESS 17810 SANDS DRIVE  
CITY-ST-ZIP ALVA FL ☐ DELETETITLE T  
NAME MARINELL, SR P  
STREET ADDRESS 1181 TRAVIS AVE  
CITY-ST-ZIP N FT MYERS FL ☐ DELETETITLE T  
NAME STRICKLAND, OTTO  
STREET ADDRESS 971 IRIS DRIVE  
CITY-ST-ZIP N FT MYERS FL ☒ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE1.1 TITLE D  
1.2 NAME BRADLEY, ROGER  
1.3 STREET ADDRESS RT 1 BOX 1825  
1.4 CITY-ST-ZIP LABELLE, FL 33935 "NA" ☒ Change ☐ Addition2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP ☐ Change ☐ Addition3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 as an attachment with an address.

SIGNATURE: Roger Bradley  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR1-30-97  
Date(941) 6931777  
Daytime Phone # 0055934

CR2E037 (9/96)