2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001990

Entity Name: CROSS CREEK INITIATIVE, INC.

FILED Mar 03, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15220 NW 5 AVENUE 309 NE 5TH AVENUE

NEWBERRY, FL 32669 GAINESVILLE, FL 32601 US US

Current Mailing Address: New Mailing Address:

15220 NW 5 AVENUE 309 NE 5TH AVENUE

NEWBERRY, FL 32669 US GAINESVILLE, FL 32601 US

FEI Number: 59-3259471 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FONDROW, KEN KIBERT, CHARLES J CEO 15220 NW 5TH AVENUE 309 NE 5TH AVENUE

NEWBERRY, FL 32669 US US GAINESVILLE, FL 32601

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: CHARLES J. KIBERT 03/03/2006

> Electronic Signature of Registered Agent Date

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

() Delete (X) Change () Addition

KIBERT, CHARLES J KIBERT, CHARLES J Name: Name: 307 NW 5TH AVE Address: 309 NE 5TH AVENUE Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32601

Title: VCD () Delete Title: DIR (X) Change () Addition

FONOROW, KEN Name: FONOROW, KEN Name:

Address: **HWY 26** Address: **HWY 26**

City-St-Zip: NEWBERRY, FL 32669 City-St-Zip: NEWBERRY, FL 32669

Title: () Delete Title: (X) Change () Addition

NEWPORT, DAVID NEWPORT, DAVID Name: Name: Address: 2023 SW 146TH ST Address: 2023 SW 146TH ST

City-St-Zip: NEWBERRY, FL 32669 City-St-Zip: NEWBERRY, FL 32669

() Delete Title: DC Title: () Change () Addition Name: PARKHURST, WILLIAM Name:

Address: 15000 WEST HWY 318 Address: City-St-Zip: WILLISTON, FL 32696 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 J. KIBERT CEO 03/03/2006