## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000000711

FILED Mar 01, 2006 Secretary of State

Entity Name: CROSSROADS COMMUNITY CHURCH OF NAPLES, INC.

Current P	rincipal Plac	e of Business:	New Princ	ipal Place of Business:	
055 PINE NAPLES, F	RIDGE RD FL 34108 (	JS			
Current Mailing Address:		New Mailing Address:			
055 PINE NAPLES, F	RIDGE RD FL 34108 (	JS			
El Number:	65-0630353	FEI Number Applied For()	FEI Number Not Appli	cable ( ) Certificate of Status Desired	( )
lame and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:	
	RADFORD G RIDGE RD FL 34108 (	JS			
					r hoth
	named entity e of Florida.	submits this statement for the p	ourpose of changing it	s registered office or registered agent, o	ı Dour,
the State	e of Florida. RE:				
the State	e of Florida. RE:	submits this statement for the p		s registered office of registered agent, o	———
n the State	e of Florida. RE:	nic Signature of Registered Age	ent		
n the State SIGNATUF  DFFICERS  itle: ame: ddress:	e of Florida.  RE: Electro  S AND DIREC	nic Signature of Registered Age CTORS: ) Delete MERLIN TOS COURT	ent	Date	
n the State	e of Florida.  RE: Electro  B AND DIRECT  D (ANGSTROM, NA199 LOS ALT NAPLES, FL COSMITH, BRADI 9976 TREASU	nic Signature of Registered Age CTORS: ) Delete MERLIN TOS COURT 34109 ) Delete FORD G	ent  ADDITION  Title: Name: Address:	Date S/CHANGES TO OFFICERS AND DIRI	
n the State SIGNATUF  DFFICERS  itle: lame: ddress: itty-St-Zip: lame: ddress:	E of Florida.  RE:  Electro  B AND DIRECT  D (ANGSTROM, NA199 LOS ALT NAPLES, FL COS ALT NAPLES, FL COS ALT D (SMITH, BRADI 9976 TREASU BONITA SPRIN	nic Signature of Registered Age CTORS:  ) Delete MERLIN FOS COURT 84109  ) Delete FORD G RE CAY LN NGS, FL 34135  ) Delete ERT RIN RD	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	Date S/CHANGES TO OFFICERS AND DIRI  ( ) Change ( ) Addition	

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: BRADFORD SMITH D 03/01/2006