


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # N95000001609		
1. Entity Name CROSSROADS BAPTIST CHURCH OF SOUTH WEST BROWARD, INC.		
Principal Place of Business 2475 GLADES CIRCLE WESTON, FL 33327	Mailing Address 2475 GLADES CIRCLE WESTON, FL 33327	



01082008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0614830	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> -- \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CARO, JOSEPH L 2016 SCHOONER LANE WESTON, FL 33327

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CARO, JOSEPH L 2016 SCHOONER LANE WESTON, FL 33327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CARO, MARTI 2016 SCHOONER LANE WESTON, FL 33327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HAGGIT, CLAYTON 884 GOLDEN CANE DR WESTON, FL 33327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/16/08-80069-014 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marta Caro

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/09/08 954-389-5700

Date

Daytime Phone