

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001609

FILED
Jan 31, 2009
Secretary of State

Entity Name: CROSSROADS BAPTIST CHURCH OF SOUTH WEST BROWARD, INC.

Current Principal Place of Business:

2475 GLADES CIRCLE
WESTON, FL 33327

New Principal Place of Business:

Current Mailing Address:

2475 GLADES CIRCLE
WESTON, FL 33327

New Mailing Address:

FEI Number: 65-0614830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARO, JOSEPH L
2016 SCHOONER LANE
WESTON, FL 33327 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CARO, JOSEPH L
Address: 2016 SCHOONER LANE
City-St-Zip: WESTON, FL 33327

Title: DV () Delete
Name: CARO, MARTI
Address: 2016 SCHOONER LANE
City-St-Zip: WESTON, FL 33327

Title: T () Delete
Name: HAGGIT, CLAYTON
Address: 884 GOLDEN CANE DR
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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: MARTI CARO

VP

01/31/2009

Electronic Signature of Signing Officer or Director

Date