2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006176

FILED May 14, 2008 Secretary of State

Entity Name: CROSSROADS CHRISTIAN MINISTRIES OF TAMPA BAY, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 5701 NORTH 20TH ST. TAMPA, FL 33616 **Current Mailing Address: New Mailing Address:** 5701 NORTH 20TH ST. TAMPA, FL 33616 FEI Number: 55-0829580 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DOGUILES, RICARDO DOGUILES, RICARDO 14550 BRUCE B. DOWNS BLVD. 4025 ANGEL OAK CT **UNIT #103** BLG. 17-277 TAMPA, FL 33613 US TAMPA, FL 33613 US 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: 05/14/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete DOGUILES, RICARDO DOGUILES, RICARDO Name: Name: 14550 BRUCE B. DOWNS BLVD. #17-277 Address: 4025 ANGEL OAK CT UNIT #103 Address: City-St-Zip: TAMPA, FL 33613 City-St-Zip: TAMPA, FL 33613 Title: SD Title: () Delete () Change () Addition Name: TANG, SONIA Name: Address: 18306 GROVESIDE PL. Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: Title: () Delete Title: () Change () Addition ABALOS, MADELYN Name: Name: 11634 CREST CREEK DR. Address: Address: City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: () Delete Title: Title: () Change () Addition BLAIR, JAY Name: Name: 1813 WELLAND DR. Address: Address: City-St-Zip: CLEARWATER, FL 33757 City-St-Zip: Title: () Delete Title: () Change () Addition NICDAO, ORLANDO Name: Name: 3781 67TH AVE. APT. B Address: Address: City-St-Zip: PINELLAS PARK, FL 33781 City-St-Zip: Title: () Delete Title: () Change () Addition TANG. LEONCIO Name: Name: Address: 18306 GROVESIDE PL. Address: LUTZ, FL 33549 City-St-Zip: 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: RICARDO DOGUILES CD 05/14/2008