

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90064 001 ****61.25

DOCUMENT # N97000006815

1. Corporation Name

CROSS PURPOSES INC.

Principal Place of Business

429 GREENBRIAR DRIVE
LAKE PARK FL 33403

Mailing Address

429 GREENBRIAR DRIVE
LAKE PARK FL 33403

524483 - 90064 - 1



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

12/05/1997

4. FEI Number

65-0813440

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

COOK, JUDITH S
429 GREENBRIAR DRIVE
TALLAHASSEE FL 33403

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

Lake Park

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME COOK, STEVEN E
STREET ADDRESS 429 GREENBRIAR DRIVE
CITY-ST-ZIP LAKE PARK FL 33403

TITLE SD ☐ DELETE

NAME COOK, JUDITH S
STREET ADDRESS 429 GREENBRIAR DRIVE
CITY-ST-ZIP LAKE PARK FL 33403

TITLE D ☐ DELETE

NAME COOK, ROBIN K
STREET ADDRESS 1524 S 2ND STREET #4
CITY-ST-ZIP LOUISVILLE FL 40208

TITLE D ☐ DELETE

NAME COOK, TODD S
STREET ADDRESS 1524 S 2ND STREET #4
CITY-ST-ZIP LOUISVILLE KY 40208

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

1403 S 2nd St, Carriage House
- KY -

1229 S 4th St #9

40203

1229 S 4th St #9

40203

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

REQUIRED
Signature and typed or printed name of signing officer or director
Steven E. Cook

Date

561-842-0104

Daytime Phone #

CR2E037 (11/98)