2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N98000004825



FILED Mar 07, 2003 8:00 am Secretary of State

CROSSI DA, INC	ROADS BAPTIST CHURCH C	OF JACKSONVILLE, FLO	ORI		03	3-07-2003 90057	023 ****6	1.25
12165 DUVA	Place of Business AL ROAD LLE FL 32218	Mailing Address 12165 DUVAL ROAD JACKSONVILLE FL 32218						
2. Principa	al Place of Business	3. Malling Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.						: 11891
City & State		City & State	City & State		CHECK HERE IF MAKING CHANGES 4. FEI Number 59-2073820 Applied For			
Zip	Country	Zip	Country		5. Certificate of Sta		\$8.75 A	Not Applicable
-	6. Name and Address of Curre	nt Registered Agent	<u> </u>			_	Fee Requi	
		Trogistaled Agent	Name	e		ess of New Registers	ed Agent	
MIXON,	, raymond			H14	LONY R	ister		
	DUVAL ROAD Onville FL 32218		Street Address		O. Box Number is No	Acceptable)		
	\$ 10		City	Took	ison ville	F	Zip Co	1218
8. The abov	ve named entity submits this statement ations of registered agent.	for the purpose of changing its	registered office	or registere	d agent or both in th	e State of Florida Lo	ســک ا	29118
the obliga	ations of registered agent.	Kiste	•	-: · · · · · · · · · · · · · · · · · · ·	a agont, or both, in t	ie State of Florida. Ta	m ramıllar witr	n, and accept
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SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable (NOTE	- Posintary d A			03/	05/03	<u>. </u>
		(NOIS	: Registered Agent sign	nature required w	men reinstating)	DATE		
		1						
	FILE NOW: FEE IS \$61.25	Trust Fund C	npaign Financing ontribution.		\$5.00 May Be Added to Fees	Make Che Florida Depa	ck Payable artment of	e to State
10.	FILE NOW: FEE IS \$61.25 OFFICERS AND D	Trust Fund C	npaign Financing ontribution.		Added to Fees	Florida Depa	artment of	State
10. TITLE	OFFICERS AND D	Trust Fund C	ontribution.		Added to Fees	Florida Depa	DIRECTORS	State N 10
10. TITLE NAME	OFFICERS AND D T JOHNSTON, DOUG	Trust Fund C	ontribution. 11. TITLE NAME		Added to Fees	Florida Depa	artment of	State
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GNATURE:

Thereby 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 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 changed, or on an attachment with an address with all other like empowered.

GNATURE:

3/05/03

904-768-7298

SIGNATURE: