

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90769 001 \*\*\*\*61.25  
04-30-2007 90769 002 \*\*\*\*61.25

**DOCUMENT # N99000005648**

1. Entity Name  
**CROSSROADS CHURCH OF ORLANDO, INC.**



Principal Place of Business  
**7101 Wright Avenue  
Tangerine, FL.  
32777**

Mailing Address  
**P.O. Box 611  
Tangerine, FL.  
32777**

**DO NOT WRITE IN THIS SPACE**



03192007 No Chg-NP CR2E037 (4/06)

4. FEI Number  
**59-3096074**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**BIRD, DOUGLAS H  
1865 CRANBERRY ISLES WAY  
APOPKA, FL 32712**

**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 \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	BIRD, DOUGLAS
STREET ADDRESS	1865 Cranberry Isles Way
CITY-ST-ZIP	Apopka, Florida 32712
TITLE	VPD
NAME	BROCK, STAN
STREET ADDRESS	29031 Shirley Shores Rd.
CITY-ST-ZIP	Tarpon Springs, Florida 32778-9689
TITLE	STD
NAME	BIRD, MARTIN
STREET ADDRESS	28 SPING HOLLW BLVD.
CITY-ST-ZIP	APOPKA, FL 32712
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:** \_\_\_\_\_

Signature and typed or printed name of signing officer or director

**4-16-07**

Date

**907-353-2517**

Daytime Phone #

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ATTACHMENT

DOCUMENT # N99000005648

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SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-07

Date

407-353-2517

Daytime Phone #