## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000064694

Entity Name: CROSSROADS ARCHITECTURE INC.

FILED Mar 24, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2358 NE CENTER CIRCLE 1111 SE FEDERAL HIGHWAY

JENSEN BEACH, FL 34957 SUITE 116

STUART, FL 34994

Current Mailing Address: New Mailing Address:

2358 NE CENTER CIRCLE 1111 SE FEDERAL HIGHWAY

JENSEN BEACH, FL 34957 SUITE 116

STUART, FL 34994

FEI Number: 20-1018199 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NORTON, NICOLE L
2358 NE CENTER CIRCLE
JENSEN BEACH, FL 34957 US

NORTON-GOZDZ, NICOLE L
2358 NE CENTER CIRCLE
JENSEN BEACH, FL 34957 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: NICOLE L. NORTON-GOZDZ 03/24/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title: ( ) Delete Title: NORTON, NICOLE L NORTON-GOZDZ, NICOLE L Name: Name: 2358 NE CENTER CIRCLE 2358 NE CENTER CIRCLE Address: Address: City-St-Zip: JENSEN BEACH, FL 34957 City-St-Zip: JENSEN BEACH, FL 34957

Title: ( ) Delete Title: VP ( ) Change (X) Addition

 Name:
 Name:
 GOZDZ, GEORGE M

 Address:
 Address:
 2358 NE CENTER CIRCLE

 City-St-Zip:
 City-St-Zip:
 JENSEN BEACH, FL 34957

Title: ( ) Delete Title: TRES ( ) Change (X) Addition

 Name:
 Name:
 CLARK, TERRY R

 Address:
 Address:
 1101 SW PINE TREE LANE

 City-St-Zip:
 City-St-Zip:
 PALM CITY, FL 34990

Title: ( ) Delete Title: SECT ( ) Change (X) Addition

 Name:
 Name:
 CLARK, RIDGWAY J

 Address:
 Address:
 1101 SW PINE TREE LANE

 City-St-Zip:
 City-St-Zip:
 PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICOLE L. NORTON-GOZDZ PRES 03/24/2005