

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000094630

FILED
Apr 28, 2008
Secretary of State

Entity Name: CROSS COUNTY ENTERPRISE, INC.

Current Principal Place of Business:

14436 63RD CT. N.
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

14436 63RD CT. N.
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 81-0675121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
5647 110TH AVE. NORTH
ROYAL PALM BEACH, FL 334110000 US

Name and Address of New Registered Agent:

KUBUSHESKI, ROBBIE
14436 63RD CT. N.
LOXAHATCHEE, FL 33470 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: ROBBIE KUBUSHESKI

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D,P () Delete
Name: KUBUSHESKI, ROBBIE
Address: 14436 63RD CT. N.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP,S () Delete
Name: KUBUSHESKI, ROBBIE
Address: 14436 63RD CT. N.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: T () Delete
Name: KUBUSHESKI, ROBBIE
Address: 14436 63RD CT. N.
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBBIE KUBUSHESKI

D.P

04/28/2008

Electronic Signature of Signing Officer or Director

Date