FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000052395

CROSSROADS OF JENSEN, INC.

Principal Place of Business 2688 N.E. DIXIE HIGWAY JENSEN BEACH FL 34957

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

Mailing Address

2688 N.E. DIXIE HIGWAY JENSEN BEACH FL 34957

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90129 011 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

06/13/1997

65-0759076

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

Zip	Country	\perp	_ ZIP	`	Journay			8. This corporation owes the	e current year in		—
4	25	29		30				Personal Property Tax.		Yes	□No
	9. Name and Address of Current	Regi	stered Agent					10. Name and Address of N	lew Registered	Agent	
					81	Name					
Grennell, Darlene						82 Street Address (P.O. Box Number is Not Acceptable)					
700 N.E. BAYBERRY CT.						Oll CCI .	-aai co	3 (1 .O. BOX (1011100) 10 1101711	,		
JENSEN BEACH FL 34957											
											0-4-
					84	City			FL	85 Zip	Code
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of m familiar with, and accept the obligation	Flor	ida. Such change was	author	zed by	tne corpo	corpora oration	ation submits this statement for s board of directors. I hereby	or the purpose of accept the appoi	changing its ntment as re	s registered egistered
SIGNATURE		4 4/8	(A)O	rr. Daniel	d A	t niomatura s	navirad w	han rainstating)	DATE		
12	Signature, typed or printed name of registered agent a OFFICERS AND				erea Agen	ı sıgnatu/e r	ednied M	hen reinstating) ADDITIONS/CHANGES T		ID DIRECTO	ORS IN 12
TITLE	D OFFICERS AND	DIR	□ DELETE	_	.1 TITLE		<u></u>			Change	Addition
	l '			1.2 NAME		ζ.ς	Sident Inneli Darlei Am E	r.P	_ ,	_	
NAME	RENNELL, KENNETH						Cre	Ant E			
STREET ADDRESS							0	4en E			
CITY-ST-ZIP	JENSEN BEACH FL 34957		DELETE		4 CITY-S	F-ZBP	4 4	· Paralelant		Change	☐ Addition
TITLE	V		IN DELETE				ViC	co President		_ Sommingo	
NAME	TAYLOR, SUSAN		•	2	2 NAME		CHE	nne" Ken			
STREET ADDRESS	1379 NE 25TH TERR.			2	.3 STREET	ADDRESS		nnell Ken BAME			
CITY-ST-ZIP	JENSEN BEACH FL 34957			_	4 CITY-S	T-ZIP -		<u> </u>			
TITLE	İ			3	A TITLE					Change	☐ Addition
NAME				3	2 NAME						
STREET ADDRESS				3	.3 STREET	ADDRESS					
CITY-ST-ZIP				3	4. CITY-S	T-ZIP					
TITLE	•		☐ DELETE	4	.1 TITLE					Change	Addition
NAME	1			4	2 NAME						
STREET ADDRESS				4	.3 STREET	ADDRESS					
CITY+ST-ZIP	İ			4	.4 CITY-S	T-ZIP					
TITLE			☐ DELETE	5	i.1 TITLE	_				☐ Change	☐ Addition
NAME				5	.2 NAME						
STREET ADDRESS				5	.3 STREET	ADDRESS					
CITY-ST-ZIP				5	.4 CITY-S	T-ZIP					
TITLE			☐ DELETE	6	1 TITLE					☐ Change	☐ Addition
NAME				6	.2 NAME	_					
STREET ADDRESS	1			6	.3 STREE	ADDRESS					
				6	6.4 CITY-S	T- ZIP					
CITY-ST-ZIP	Lertify that the information supplied with	this	filing does not qualify t	or the	exempt	on stated	l in Sec	tion 119.07(3)(i). Florida Stat	utes. I further ce	rtify that the	information
indicated	on this annual report or supplemental a director of the corporation or the receiv	annua	al report is true and ac	curate a	and tha	t my sign	ature s	hall have the same legal effec	it as if made und	er oatn; that	(Iaman

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-99 561-334-9331