

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 18, 2003 8:00 am**  
**Secretary of State**

08-18-2003 90170 008 \*\*\*150.00

**DOCUMENT # P99000073175**

**1. Entity Name**  
**CROSSING DEVELOPMENT CORPORATION**



**Principal Place of Business**  
**1307 19TH PLACE**  
**VERO BEACH FL 32960**  
**US**

**Mailing Address**  
**P. O. BOX 1779**  
**VERO BEACH FL 32961**

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. FEI Number** **65-0952695**

Applied For  
Not Applicable

**5. Certificate of Status Desired** ☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

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

**7. Name and Address of New Registered Agent**

**BRACKETT, MARK A**  
**1915 34TH AVENUE**  
**VERO BEACH FL 32960**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**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

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing**  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**  
**PD**  
**BRACKETT, MARK**  
**1915 34TH AVENUE**  
**VERO BEACH FL 32960**

☐ Delete

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

☐ Change ☐ Addition

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☐ Change ☐ Addition

**12. I hereby 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0129284 AT

CR2E034 (4/03)

*Attachment*

*10111093*  
*#P99000073175*

**BRACKETT & COMPANY**

Residential Development

1307 19th PLACE  
POST OFFICE BOX 1779  
VERO BEACH, FLORIDA 32961

TELEPHONE (772) 567-9255  
FACSIMILE (772) 567-9253

July 21, 2003

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

We are in receipt of the 2003 Uniform Business Report Form for Crossing Development Corporation, FEIN 65-0952695. Our company did not receive the first notice, therefore we are enclosing the original \$150.00 filing fee and requesting that the late fee of \$400.00 be waived.

Please call our office should you have any questions.

Sincerely,



Mark A. Brackett  
President