

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000006384

**FILED**  
**Feb 04, 2013**  
**Secretary of State**  
**CC4575090181**

**Entity Name:** CROSSROADS ALLIANCE & MINISTRIES, INC.

**Current Principal Place of Business:**

4800 NW 5TH ST., SUITE 201  
OCALA, FL 34482

**Current Mailing Address:**

PO BOX 771918  
OCALA, FL 34477

**FEI Number:** 84-1651362

**Certificate of Status Desired:** Yes

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

EWING, STEVEN R  
5580 SE 37TH PLACE  
OCALA, FL 34471 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	B	Title	PRES
Name	HOULIHAN, BOB	Name	EWING, STEVEN R
Address	1641 YORKSHIRE TRAIL	Address	5580 SE 37TH PLALCE
City-State-Zip:	LAKELAND FL 33809	City-State-Zip:	OCALA FL 34480

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STEVEN R EWING

**PRESIDENT**

**02/04/2013**

Electronic Signature of Signing Officer/Director Detail

Date