

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009787

Entity Name: CAMPUS CRUSADE FOR CHRIST OCEANIA, INC.**Current Principal Place of Business:**100 LAKE HART DR. - 3500
ORLANDO, FL 32832-0100**Current Mailing Address:**100 LAKE HART DR. - 3500
ORLANDO, FL 32832-0100**FEI Number:** 26-1257172**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	PRESIDENT
Name	SELLERS, STEVEN C
Address	100 LAKE HART DRIVE - 3500
City-State-Zip:	ORLANDO FL 32832

Title	DIRECTOR
Name	ROGERS, JOHN F
Address	100 LAKE HART DRIVE - 3500
City-State-Zip:	ORLANDO FL 32832

Title	SECRETARY
Name	MORGAN, KAREN BRAWN
Address	100 LAKE HART DRIVE - 3500
City-State-Zip:	ORLANDO FL 32832

Title	DIRECTOR
Name	SORGIUS, MIKE
Address	100 LAKE HART DRIVE - 3500
City-State-Zip:	ORLANDO FL 32832

Title	TREASURER
Name	SOLWICK, TED
Address	100 LAKE HART DRIVE - 3500
City-State-Zip:	ORLANDO FL 32832

Title	DIRECTOR
Name	TJERNAGEL, MARK
Address	100 LAKE HART DR. #3500
City-State-Zip:	ORLANDO FL 32832

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: KAREN B. MORGAN**SECRETARY****04/27/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date