

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713458

FILED
Apr 21, 2005
Secretary of State

Entity Name: BRANDON FLORIDA CONGREGATION OF JEHOVAH'S WITNESSES INCORPORATED

Current Principal Place of Business:

1647 S MULRENNAN ROAD
VALRICO, FL 33594 US

New Principal Place of Business:

Current Mailing Address:

1914 S FORBES ROAD
PLANT CITY, FL 33567 US

New Mailing Address:

FEI Number: 59-2894751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BELCHER, ALLEN D
1914 S FORBES ROAD
PLANT CITY, FL 33567 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BELCHER, ALLEN D
Address: 1914 S FORBES ROAD
City-St-Zip: PLANT CITY, FL 33567

Title: SD () Delete
Name: BELCHER, ALLEN D.,
Address: 1914 S. FORBES ROAD
City-St-Zip: PLANT CITY, FL

Title: TD () Delete
Name: REICH, BRUCE
Address: 1709 TALLOW TREE CIRCLE
City-St-Zip: VALRICO, FL 33594

Title: SD () Delete
Name: KASTEN, JOHN P
Address: 6089 SANDHILL RIDGE DR
City-St-Zip: LITHIA, FL 33547

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOHN P KASTEN

SD

04/21/2005

Electronic Signature of Signing Officer or Director

Date