ILL NUTT. ILING ILL TO OUT LUTY NONPROFIT CORPORATION



Secretary of State DIVISION OF CORPORATIONS

1998

14606 HWY 301 S

DOCUMENT #

ANNUAL REPORT

RIVERVIEW CONGREGATION OF JEHOVAH'S WITNESSES IN

(5)

6810 KRYCUL

Jan 30 1998 8:00am Secretary of State

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Principal Place of Business	Mailing Address	Liaueir imeen iines alient tute meen utie miste ainti nitti nitti alleit alleit alleit alleit alleit alleit all

1 14606 HWY 301 S 6610 KRYCUL WIMAUMA FL 33598 BIVERVIEW FL 33569			3. Date Incorporated or Qualified				
I WIMAUMA FL 33598 RIVERVIEW FL 33569			06/26/1973				
					4. FEI Number	Applied For	
					59-2419646	Not Applicable	
2. Principal Place of Business 2a. Mailing Address 21				5. Certificate of Status Desired	8.75 Additional Fee Required		
Suite, Apt. #, etc. Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be		5.00 May Be		
22					Trust Fund Contribution		
City & State		City & State	City & State		7. Is this nonprofit corporation a homeowners association?		
23 28					☐ Yes ☐ No		
Zip	Country	Zip Country			8. This corporation owes or has paid the current year Intangible		
24	25		30 Personal Property Tax due June 30. Yes No				
	9. Name and Address of Current	Hegistered Agent		al Ni	10. Name and Address of New Registered Age	nt	
			8	Name Marques, Carl R.			
	AN, RONNIE D		8	82 Street Address (P.O. Box Number is Not Acceptable) 711 McAllister Ave.			
	YCUL AVE		<u> </u>				
RIVERVIS	EW FL 33569		8	3			
			8	4 City	85	Zip Code	
				Sun	City Center FL °	22572	
11. Pursuant	to the provisions of Sections 617.0502 egistered agent, or both, in the State (and 617.1508, Florida Statute of Florida, Such change was a	s, the abo	ve-named corp	oration submits this statement for the purpose of cha- ion's board of directors. I hereby accept the appoint	nging its registered	
agent. I a	m familiar with, and accept the obligat	ions of, Section 617.0503, Flor	ida Statut	es.	contraction and contraction in the copy according appointment	ichi da regiaterea	
SIGNATURE	Malo Malo			larques	1/22/98		
12.	Signature, typed or printed name of registered agen OFFICERS AND			gent signature require		T07070	
TITLE	VD OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIF	Change 2 Addition	
NAME	- -	peccie	1.2 NAME		Margues, Carl R.	mange K Addition	
STREET ADDRESS	CALVO,G.				711 McAllister Ave.		
	8008 VALRIE LANE RIVERVIEW FL				Sun City Center, FL 335	72	
CITY-ST-ZIP TITLE	D	DELETE	1.4 CITY - 2.1 TITLE			Change	
NAME	_		2.3 TITLE 2.2 NAME		Ш,	Triange Addition [
STREET ADDRESS	BAIER, AUGUST			i			
CITY-ST-ZIP	ESS 18450 U.S. 301 S. SUN SITY CENTER, F.G.			ET ADDRESS			
TITLE	PCD	X DELETE	2. 4 CITY 3.1 TITLE		÷	Change Addition	
NAME	CALLAHAN, RONNIE	MT Deceig	3.2 NAME		_ <u> </u>	Shariye Addition	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP	RIVERVIEW FL			1	ter and		
TITLE	SD	☐ DELETE	3.4. CITY 4.1 TITLE	·	177	Change Addition	
NAME	SMITH, B.		4. 2 NAM			gv	
STREET ADDRESS	10009 BRANWOOD DR.		1	T ADDRESS			
CITY-ST-ZIP	RIVERVIEW FL		4.4 CITY-				
TITLE	T	☐ DELETE	5.1 TITLE	ψ1 'ΔII	Ti	Change	
NAME	TORRES, BENNY		5.2 NAME				
STREET ADDRESS	6810 KRYCUL AVE			T ADDRESS			
CITY-ST-ZIP	RIVERVIEW FL		5.4 CITY-				
TITLE		DELETE	6.1 TITLE	 	Пс	hange Addition	
NAME		_	6.2 NAME	1	_		
STREET ADDRESS			1	T ADDRESS		1	
C/TY-ST-ZIP			6.4 CITY-				
	ertify that the information supplied with	this filing does not qualify for			Section 119.07(3)(i), Florida Statutes. I further certify t	hat the information	

Indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.