

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728320

1. Entity Name

THE ST. PETERSBURG FLORIDA COMPANY OF JEHOVAH'S

Principal Place of Business

Mailing Address

9701 60TH STREET NORTH
PINELLAS PARK FL 33782
US

10331 38TH ST., N
CLEARWATER FL 34622
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THREATS, JOHN
10331 38TH ST., N
CLEARWATER FL 34622

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.

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 \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME PD
STREET ADDRESS THREATS, JOHN
CITY-ST-ZIP 10331 38 STREET N
CLEARWATER FL

TITLE
NAME SD
STREET ADDRESS ALMODOVAR, CESAR R
CITY-ST-ZIP 5535 86TH AVENUE N
PINELLAS PARK FL

TITLE
NAME VD
STREET ADDRESS BROMMELSICK, HENRY W
CITY-ST-ZIP 8025-53RD WAY N.
PINELLAS PARK FL 33781

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME SD
STREET ADDRESS Digno Brown
CITY-ST-ZIP 14945 Hidden oaks cir
Clearwater, FL 33764

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 617, 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: Digno A. Brown 8/11/01 (727) 533-3660

FILED
Aug 31, 2001 8:00 am
Secretary of State

08-31-2001 90002 021 ****61.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (5/01)