

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90208 045 ****70.00

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01072007 Chg-NP CR2E037 (12/06)

DOCUMENT # 728320 1. Entity Name SKYVIEW CONGREGATION OF JEHOVAH'S WITNESSES, PINELLAS PARK, FLORIDA, INC.					
Principal Place of Business 9701 60TH STREET NORTH PINELLAS PARK, FL 33782 US			Mailing Address 5535 86TH AVE N. PINELLAS PARK, FL 33782		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2979590	
5. Certificate of Status Desired ☒				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent UHLIG, PETER 6287 92ND PLACE #2701 PINELLAS PARK, FL 33782			7. Name and Address of New Registered Agent Name SAME AS #6 - Peter Uhlig Street Address (P.O. Box Number is Not Acceptable) 9575 58th St N City Pinellas Park FL Zip Code 33782		
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE N/A - SAME (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 + 8.75 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD NAME UHLIG, PETER STREET ADDRESS 6287-92ND PLACE #2701 CITY-ST-ZIP PINELLAS PARK, FL 33782	☐ Delete		TITLE 9575 58th St N NAME PINELLAS PARK, FL 33782 STREET ADDRESS 9575 58th St N CITY-ST-ZIP PINELLAS PARK, FL 33782	☒ Change ☐ Addition	
TITLE SD NAME ALMODOVAR, CESAR STREET ADDRESS 5535 86TH AVE N. CITY-ST-ZIP PINELLAS PARK, FL 33782	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition	
TITLE VD NAME BROMMELSICK, HENRY W STREET ADDRESS 8025-63RD WAY N. CITY-ST-ZIP PINELLAS PARK, FL 33781	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:			1/7/07 721 460-1039		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		