

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # N21607 1. Entity Name EAST BOCA RATON CONGREGATION OF JEHOVAH'S WITNESSES, INC.	
--	---

Principal Place of Business 19230 STATE ROAD 7 (441) BOCA RATON, FL 33498-4763	Mailing Address EAST CONG. P O BOX 276063 BOCA RATON, FL 33427 US
--	---

DO NOT WRITE IN THIS SPACE



01132007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0040360	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**JESSEL, ROBERT
19230 STATE RD 7
BOCA RATON, FL 33498**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
---	--	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP JESSEL, ROBERT 19230 ST RD 7 BOCA RATON, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTS HAUPT, STEVIN 19230 STATE ROAD 7 BOCA RATON, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DEMOSTHENES, STANLEY 19230 ST RD 7 BOCA RATON, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000595137
01/23/07-80029-002 61.25

**DO NOT WRITE
IN THIS SPACE**

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: *Robert Jessel* 1/17/07 561979-0856
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #