


**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 02, 2004 08:00 AM**  
**Secretary of State**

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| <b>DOCUMENT # N25247</b><br>1. Entity Name<br><b>MERRITT ISLAND, FLORIDA CONGREGATION OF<br/>JEHOVAH'S WITNESSES, INC.</b> |  |
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| Principal Place of Business<br><b>520 SO PLUMOSA STR<br/>MERRITT ISLD, FL 32952 US</b> | Mailing Address<br><b>1994 E PHILIPS CT<br/>MERRITT ISLAND, FL 32952 US</b> |
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| <b>6. Name and Address of Current Registered Agent</b><br><br><b>SPILLERS, ROGER D<br/>1994 E PHILIPS CT<br/>MERRITT ISLAND, FL 32952</b> |
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| <b>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.</b> |  |
| SIGNATURE <u><i>Roger D Spillers</i></u><br><small>Signature, typed or printed name of registered agent and title if applicable.</small>   | DATE <u>1-13-2004</u><br><small>(NOTE: Registered Agent signature required when reinstating)</small> |

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| <b>Filing Fee is \$61.25<br/>Due by May 1, 2004</b> | <b>9. Election Campaign Financing<br/>Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be<br/>Added to Fees</b> |
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| <b>10. OFFICERS AND DIRECTORS</b>  |   |
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| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> | <b>D</b><br><b>SPILLERS, ROGER D</b><br><b>1994 E PHILIPS CT</b><br><b>MERRITT ISLAND, FL 32952</b>     |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> | <b>D</b><br><b>O'BRIEN, JOHN D</b><br><b>730 WILD FLOWER ST</b><br><b>MERRITT ISLAND, FL 32953</b>      |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> | <b>D</b><br><b>MCPHEE, ROSTAN A</b><br><b>250 IMPERIAL ST LOT 15</b><br><b>MERRITT ISLAND, FL 32952</b> |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |   |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |   |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |   |

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| <b>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 of this report.</b> |
| SIGNATURE <u><i>[Signature]</i></u> <u>1-29-04</u>   |