FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

Suite, Apt. #, etc.

City & State

Zip

24



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # 711500

(9)

Suite, Apt. #, etc.

City & State

Ζiρ

SAN JOSE CONGREGATION OF JEHOVAH'S WITNESSES, IN C.

Country

9. Name and Address of Current Registered Agent

C.

Principal Place of Business Mailing Address

7040 SAN JOSE BLVD.
JACKBONVILLE FL 32217

2. Principal Place of Business 28. Mailing Address

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FILED May 06 1998 8:00am Secretary of State

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<u> 1 (89):11 1000) 219</u>	FI ITORY ENIN 9 0	(44 00 11 0101) 010 11	L BIRIN BLAN BIRIN I	

Yes No

☐ Yes

7. Is this nonprofit corporation a homeowners association?

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified

09/19/1966

59-2016731

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

4. FEI Number

BRUCE E. HATCHER			82	Street A	Address (P.O. Box Number is Not Acceptable)							
5457 COMMUNTIY CIR. JACKSONVILLE FL 32207												
			84	City	FL	85	Zip C	ode				
11 Pureuent	to the provisions of Sections 617 0502 and	617 1508 Florida Statutas	the ehow	named		Chang	ina ite	registered				
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.												
SIGNATURE _	Signature, typed or printed name of registered agent and	into M annulis abis	anistared Ass	-t sisset us	required when relocations) DATE							
12.	OFFICERS AND DIF		13.									
TITLE	PD	DELETE	1.1 TITLE			☐ Cha		Addition				
NAME	BRUCE E. HATCHER		1.2 NAME	Ĭ			-					
STREET ADDRESS	7040 SAN JOSE BLVD.		1.3 STREET	ADDRESS								
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-S									
TITLE	SD	DELETE	2.1 TITLE			Cha	nge	Addition				
NAME	MATNEY, R. DALE		2.2 NAME									
STREET ADDRESS	7040 SAN JOSE BLVD		2.3 STREET	ADDRESS								
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY - 8	T-ZIP								
TITLE	D	☐ DELETE	3.1 TITLE			Cha	inge	Addition				
NAME	fussell, leon III		3.2 NAME									
STREET ADDRESS	7040 SAN JOSE BLVD.		3.3 STREET	address								
CITY-ST-ZIP	JACKSONVILLE FL		3.4. CITY-5	r-zip								
TITLE		DELETE	4.1 TITLE			☐ Cha	inge	☐ Addition				
NAME		į	4. 2 NAME									
STREET ADDRESS			4.3 STREET	ADDRESS								
CITY-ST-ZIP			4.4 CITY-S	- ZIP								
TITLE		☐ DELETE	5.1 TITLE			☐ Cha	inge	Addition				
NAME		,	5.2 NAME	ľ								
STREET ADDRESS			5.3 STREET	ADDRESS								
CITY-ST-ZIP			5.4 CITY-S	-ZIP		TT 2.						
TITLE		☐ DELETE	6.1 TITLE			☐ Cha	nge	☐ Addition				
NAME			6.2 NAME	- 1								
STREET ADDRESS			6.3 STREET									
CITY-ST-ZIP		o fillian de la part avertification	6.4 CITY-S		d in Contine 110 07(0)(i) Florida Des to- 14 all	-4:4 . AE -	4 66 - 7	afa an atlas				
14. 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 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.												

Country

81 Name

SIGNATURE: R. Dale Matrey WHILD R. DALE MATNEY 4/21/98