

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03178

**Entity Name:** ENGLISH LEESBURG CONGREGATION OF JEHOVAH'S WITNESSES INC.

**FILED**  
**Mar 20, 2014**  
**Secretary of State**  
**CC3832001780**

**Current Principal Place of Business:**

533 SUNNYSIDE DR  
LEESBURG, FL 34748

**Current Mailing Address:**

P O BOX 492223  
LEESBURG, FL 34748 US

**FEI Number: 59-2387360**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LACEY, JACKIE SR  
715 CHESTER STREET  
LEESBURG, FL 34748 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name BROWN, RICHARD JR  
Address P O BOX 491495  
City-State-Zip: LEESBURG FL 34748

Title D  
Name LACEY, JACK SR.  
Address P O BOX 492223  
City-State-Zip: LEESBURG FL 34749

Title D  
Name FLUITT, JOHN  
Address 501 MILLS ST.  
City-State-Zip: LEESBURG FL 34748

Title D  
Name ARCHIE, CLARENCE  
Address 724 W. ALFRED ST.  
City-State-Zip: TAVARES FL 32778

Title D  
Name PELLEGRINO, LOUIS  
Address 502 BRIGADOON CIRCLE  
City-State-Zip: LEESBURG FL 34788

Title D  
Name DAVIS, GEORGE R  
Address 25532 BELLE ALLIANCE.  
City-State-Zip: LEESBURG FL 34748

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: GEORGE DAVIS**

**SECRETARY**

**03/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date