

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04871

Entity Name: REGENCY CONGREGATION OF JEHOVAH'S WITNESSES, INC.**Current Principal Place of Business:**11225-1 ASHLEY MELISSE
JACKSONVILLE, FL 32225**Current Mailing Address:**11225-1 ASHLEY MELISSE
JACKSONVILLE, FL 32225 US**FEI Number: 59-2024016****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**HARRELL, IRVING D
4544 BAY HARBOUR DRIVE
JACKSONVILLE, FL 32225 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: IRVING D. HARRELL****04/14/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name CAMERON, STANLEY V
Address 10951 HOUNDWELL WAY
City-State-Zip: JACKSONVILLE FL 32225

Title TREASURER, DIRECTOR
Name SWEAT, JAMES TJR
Address 2351 JADESTONE CT.
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name BENNETT, ROYCE L
Address 3953 ARBOR LAKE DR W
City-State-Zip: JACKSONVILLE FL 32225

Title DIRECTOR
Name PACE, BENJAMIN T
Address 1112 AKERS DRIVE
City-State-Zip: JACKSONVILLE FL 32225

Title AGENT/DIRECTOR
Name HARRELL, IRVING D
Address 4544 BAY HARBOUR DR.
City-State-Zip: JACKSONVILLE FL 32225

Title DIRECTOR
Name BROOKS, MICHAEL GSR
Address 11909 BETULA ROAD
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name BENNETT, JARED W
Address 1196 SUNRAY CT
City-State-Zip: JACKSONVILLE FL 32218

Title DIRECTOR
Name BRYANT, KELVIN B
Address 553 MONTY LANE
City-State-Zip: JACKSONVILLE FL 32225

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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: REGINALD TA JUAN DIXON**SECRETARY****04/14/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	SECRETARY, DIRECTOR
Name	DIXON, REGINALD TA JUAN
Address	10735 SAN ANTONIO COURT
City-State-Zip:	JACKSONVILLE FL 32246