

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N27478

**FILED**  
**Feb 03, 2016**  
**Secretary of State**  
**CC7651781142**

**Entity Name:** NORTH LAUDERDALE LAKES CONGREGATION OF JEHOVAH'S WITNESSES, INC.

**Current Principal Place of Business:**

6160 BOULEVARD OF CHAMPIONS  
NORTH LAUDERDALE, FL 33068

**Current Mailing Address:**

6160 BOULEVARD OF CHAMPIONS  
NORTH LAUDERDALE, FL 33068

**FEI Number: 59-2805667**

**Certificate of Status Desired: No**

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

SHAMBRAY, DELBERT KEITH  
1461 SUSSEX DRIVE  
NORTH LAUDERDALE, FL 33068 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 PD  
Name DELBERT KEITH SHAMBRAY  
Address 1461 SUSSEX DRIVE  
City-State-Zip: NORTH LAUDERDALE FL 33068

Title VD  
Name EMMAANUEL EMAKPO  
Address 5352 GATE LAKE ROAD  
City-State-Zip: TAMARAC FL 33319

Title STD  
Name ERROL ANTHONY SMITH  
Address 6331 SW 5TH STREET  
City-State-Zip: MARGATE FL 33068

*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: DELBERT SHAMBRAY**

**PRESIDENT**

**02/03/2016**

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

\_\_\_\_\_  
Date