

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 29, 2007  
Secretary of State**

DOCUMENT# 708869

Entity Name: HOMESTEAD FLORIDA CONGREGATION OF JEHOVAH'S WITNESSES, INC.

**Current Principal Place of Business:**

18505 SW 288 ST.  
HOMESTEAD, FL 33031

**New Principal Place of Business:**

**Current Mailing Address:**

20455 SW 264 TH STREET  
HOMESTEAD, FL 33031

**New Mailing Address:**

FEI Number: 59-1756054      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MORRIS, MAX  
20455 SW 264TH STREET  
HOMESTEAD, FL 33031      US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HANS, MICHAEL  
Address: 19255 SW 312 ST  
City-St-Zip: HOMESTEAD, FL 33030

Title: TD ( ) Delete  
Name: MAJEWSKI, ROBERT A  
Address: 17080 SW 284 ST  
City-St-Zip: HOMESTEAD, FL 33031

Title: SD ( ) Delete  
Name: MORRIS, MAX  
Address: 20455 SW 264 ST  
City-St-Zip: HOMESTEAD, FL 33031

Title: VD ( ) Delete  
Name: FISHER, JAMES  
Address: 2221 SE 27 DR  
City-St-Zip: HOMESTEAD, FL 33035

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: DAVIS, KURTISS  
Address: 562 SE 18 DR  
City-St-Zip: HOMESTEAD, FL 33033

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MAX MORRIS

SD

01/29/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date