2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#719814

FILED Apr 28, 2005 Secretary of State

Entity Name: TARPON SPRINGS CONGREGATION OF JEHOVAH'S WITNESSES, INC.

	rincipal Place of Business:	New P	New Principal Place of Business:		
	ES, INC AKWOOD AVE. BPRINGS, FL 346895533 US	3			
Current M	ailing Address:	New M	New Mailing Address:		
	ES, INC AKWOOD AVE. BPRINGS, FL 346895533 US	3			
FEI Number:	59-2388477 FEI Number Ap	pplied For () FEI Number Not	Applicable () Certificate of Status Desired ()		
Name and	Address of Current Registe	ered Agent: Name a	and Address of New Registered Agent:		
TARPON	RPON AVENUE SPRINGS, FL 34689 US	tament for the nurnose of changi	ng its registered office or registered agent, or both,		
	e of Florida.	ternent for the purpose of changi	ig its registered office of registered agent, or both,		
SIGNATU	RE:				
	Electronic Signature of	Registered Agent	Date		
OFFICER	S AND DIRECTORS:	ADDIT	ONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address:	STD () Delete MCDANIEL, HARVEY N, 241 TERRACE RD	Title: Name: Address;	() Change () Addition		
Title: Name: Address: City-St-Zip: Title: Name:	TARPON SPRINGS, FL PD () Delete TYNER, DAVID 1219 E TARPON AVE. TARPON SPRINGS, FL 34689 D () Delete KOVALCHICK, SR., ANDREW	City-St-Z Title: Name: Address: City-St-Z Title: Name:	() Change () Addition		
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: City-St-Zip:	TARPON SPRINGS, FL PD () Delete TYNER, DAVID 1219 E TARPON AVE. TARPON SPRINGS, FL 34689 D () Delete	City-St-Z Title: Name: Address: City-St-Z Title:	() Change () Addition ip: () Change () Addition		
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	TARPON SPRINGS, FL PD () Delete TYNER, DAVID 1219 E TARPON AVE. TARPON SPRINGS, FL 34689 D () Delete KOVALCHICK, SR., ANDREW 1315 GARDEN AVE.	City-St-Z Title: Name: Address: City-St-Z Title: Name: Address:	() Change () Addition ip: () Change () Addition ip: () Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:	DAVID TYNER	PD	04/28/2005