## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

732564 DOCUMENT #

(0)

CAPE CORAL, FLORIDA, CONGREGATION OF JEHOVAH'S W ITNESSES, INC.

Principal Place of Business

Mailing Address



1709 NE 6TH TERR CAPE CORAL FL 33909				1709 NE 6TH TERR CAPE CORAL FL 33909									
ONTE COMME TE SOURS			On E	ONE COUNTRY I STATE				-	3. Date Incorporated or Qualified 04/24/1975	3a. Date of Last Report 05/01/1995			
2. Principal Plac	e of Business	2a. Maijir	2a. Maijing Address					4. FEI Number	<del></del>		Applied For		
424	NICHOLA	26 C/C	26 E/O JAMES SAZAMA					59-1635792			Not Applicable		
Suite, Apt. #,		T 0.3.	Suite, Apt. #, etc. 27 247 5 W 22 NO PL					5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State	CORAL	City	Oity & State  28 CAPE CURAL FL.					Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees			
Zip 3396		Country LEE	Zn	Zip 33GG					8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes █ਿ No				
24		Address of Curren	1 1	Agent	1-21	1			10. Name and Address of New	Registered /	Agent		
1709 N.E.	S, DORCEY E. . 6TH TERR. DRAL FL 3390					81 82 83		Address	AMA, JAMES P (P.O. Box Number is Not Accepta SW 22ND PLACE	ible)			
						84		CAF	E CORAL	FL	1 1 '	Zip Code 33991	
11. Pursuant to or registere familiar with SIGNATURE	o the provisions of agent, or both n, and accept the		line	<u>፡</u>	ites, the abouted by the iss.				or submits this statement for the pin of directors. I hereby accept the ap	DATE	9	16	
12.		OFFICERS AN	D DIRECTOR	S	13				ADDITIONS/CHANGES TO OF				
TITLE	PD			DELETE	117	ITLE		D			Change	Addition	
NAME	sazama, j	IAMES			121	IAME		301	IN RICHARDSON				
STREET ADDRESS	247 SW 22	PLACE			1.3 3	STREE	T ADDRESS	131	USW. 4 TH CT	2000	n dini		
CITY - ST - ZIP	CAPE COR	IAL FL 33991			1.41	CITY-	ST - ZIP	CA	LPECORAL, FL 3	5441 ·.	L Change	, The contract	
TITLE	VD			DELETE		TITLE		VI			Chang	e ☐ Addition	
NAME		, stephen				NAME		MO	RROW, STEPHEN	_			
STREET ADDRESS				2.3 STREET ADDRES			T ADDRESS	141	INIZ SW 10TH PLACE CAPE CORAL FL 33991				
CITY-ST-ZIP		RAL FL 33991					-ST-ZIP	CA	PE CORAL FL 33	991	☐ Chang	e Addition	
TITLE	SD			DELETE		TITLE					- Criany	е	
NAME		HEOPHILUS				NAME		1					
STREET ADDRESS		IST. PLACE					T ADDRESS						
CITY-ST-ZIP	CAPE COR	RAL FL 33991		TUBELETE			- ST - ZIP	<del> </del>			Chang	e Addition	
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NAME .		)ne, douglas e.				NAM							
STREET ADDRESS	1413 S.E.						ET ADDRESS	·					
CITY-ST-ZIP	CAPE COP	WL FL	<del> </del>	THOELETE		CITY -	ST-ZIP	<del> </del>			Chang	e 🔲 Addition	
TITLE	D Kreger. /	ADTUI ID K		[Morrein	1	NAME							
NAME	1222 SE 3						: Et address	.					
STREET ADORESS	CAPE COF							'					
CiTY-ST-ZIP	D D	TVL FL	<u>-</u>	DOELETE		TITLE	-ST-ZIP	<del> </del>			☐ Chang	ge 🔲 Addition	
TITLE	_	EZ, FIDEL J		C PY DELETE		NAM						-	
NAME	1102 SW						e Et address						
STREET ADDRESS	CAPE COI						: 1 AUUN: 55 - ST-ZIP	<u>'</u>					
CITY-ST-ZIP	owne out	e information supplied	I with this film	g is voluntarily fo	urnished an	d do	es not qu	ualify for	the exemption stated in Section 1	19.07(3)(k), F	lorida Sta	atutes. I further	

certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or an attachment with an address.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SAZAMA

2.-2.9.96 941-283-1664 Dayton Phone #