

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 27, 2001 8:00 am
Secretary of State

07-27-2001 90003 040 ****61.25

0017117

DOCUMENT # 764177

1. Entity Name

FOREST CONGREGATION OF JEHOVAH'S WITNESSES, INCO



Principal Place of Business

13150 NE 1 ST RD
 SILVER SPRINGS FL 34488
 US

Mailing Address

13150 NE 1 ST RD
 SILVER SPRINGS FL 34488
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1992955

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CUMMINGS, RICHARD D SR
13150 NE 1 ST RD
SILVER SPRINGS FL 34488

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: **VD** Delete
 NAME: **HOGAN, ROBERT T**
 STREET ADDRESS: **10854 NE CNTY HWY 314**
 CITY-ST-ZIP: **SILVER SPRINGS FL 34488**

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: **STD** Delete
 NAME: **WARREN, DACONTA D**
 STREET ADDRESS: **PO BOX 700**
 CITY-ST-ZIP: **SILVER SPRING FL 34489-0700**

TITLE: **S/T/D** Change Addition
 NAME: **DEES, Daniel W. III**
 STREET ADDRESS: **17047 S.E. 95th St, Rd.**
 CITY-ST-ZIP: **Ocklawaha, Fla: 32179**

TITLE: **PD** Delete
 NAME: **CUMMINGS, RICHARD D SR**
 STREET ADDRESS: **13150 N.E. 1ST ST. RD.**
 CITY-ST-ZIP: **SILVER SPRINGS FL 34488**

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: **D** Delete
 NAME: **ARDILES, HECTOR S**
 STREET ADDRESS: **1635 SE 185TH CT.**
 CITY-ST-ZIP: **SILVER SPRINGS FL 34488**

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Change Addition
 NAME: Change Addition
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 CITY-ST-ZIP: Change Addition

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Daniel W. Dees III

7/27/01

352-625-1690

CR2E037 (5/01)