

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764177

FILED
Jan 03, 2012
Secretary of State

Entity Name: FOREST CONGREGATION OF JEHOVAH'S WITNESSES, INCORPORATED

Current Principal Place of Business:

18081 SE 17TH STREET
SILVER SPRINGS, FL 34488 US

New Principal Place of Business:

Current Mailing Address:

13150 NE 1ST STREET ROAD
SILVER SPRINGS, FL 34488 US

New Mailing Address:

FEI Number: 59-1992955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUMMINGS, RICHARD D SR
13150 NE 1ST ST RD
SILVER SPRINGS, FL 34488 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: VD
Name: HOGAN, ROBERT T
Address: 10854 NE CNTY HWY 314
City-St-Zip: SILVER SPRINGS, FL 34488

Title: PDC
Name: CUMMINGS, RICHARD D SR
Address: 13150 N.E. 1ST ST. RD.
City-St-Zip: SILVER SPRINGS, FL 34488

Title: STD
Name: MACBETH, WARREN
Address: 7557 N CR 314A
City-St-Zip: SILVER SPRINGS, FL 34488

Title: D
Name: DEES, DANIELS W III
Address: 17047 SE 95TH ST RD
City-St-Zip: OCKLAWAHA, FL 32179

Title: D
Name: CURTIS, CONNIE
Address: 17845 SE 90TH STREET
City-St-Zip: OCKLAWAHA, FL 32179

Title: D
Name: CURTIS, CLIFF
Address: 16085 SE 112TH PLACE
City-St-Zip: OCKLAWAHA, FL 32179 US

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: WARREN MACBETH

STD

01/03/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date