

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 9:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 771195 (5)

1. Corporation Name

NORTH BRANDON FLORIDA CONGREGATION OF JEHOVAH'S
WITNESSES, INCORPORATED

Principal Place of Business

Mailing Address

C/O MICHAEL KOVALAK
708 BRYAN RD.
BRANDON FL 33511
US

C/O MICHAEL KOVALAK
708 BRYAN RD.
BRANDON FL 33511
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/14/1983

3a. Date of Last Report
03/03/1994

4. FEI Number
59-2345431

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 %o MANUEL A. Romero

26 %o Manuel A. Romero

22 Suite, Apt. #, etc.
2918 Forest Circle

27 Suite, Apt. #, etc.
2918 Forest Circle

23 City & State
Seffner, FL

28 City & State
Seffner, FL

24 Zip Country
33584 USA

29 Zip Country
33584 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KOVALAK, MICHAEL
708 BRYAN RD.
BRANDON FL 33511

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Manuel A. Romero

4-24-95

Signature, typed or printed name of registered agent (overlaid or applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
ROMERO, MANUEL A.
2918 FOREST CIRCLE
SEFFNER FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VPD
CARRADERO, ISRAEL
4648 EASTWIND DR.
PLANT CITY FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

STD
KOVALAK, MICHAEL
708 BRYAN RD
BRANDON FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

AST
JIMENES, BENJAMIN J
720 INNERGARY PL.
VALRICO FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

ATD
MILO, JAVIER
2608 OAKDALE ST.
SEFFNER FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
VAZQUEZ, HERIBERTO
PO BOX 426 N/A
SYDNEY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. 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 on an attachment with no address.

SIGNATURE:

Manuel A. Romero
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-95 (813) 651-0984
Date Telephone