2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Secretary of State

DOCUMENT # 771195

1. Entity Name
NORTH SPANISH CONGREGATION OF JEHOVAH'S WITNESSES, BRANDON, FLORIDA, INC.

Principal Place of Business	Mailing Address
3233 MCINTOSH ROAD DOVER, FL 33527 US	% ROMERO, MANUEL A. 1006 LUMSDEN TRACE CIRCLE VALRICO, FL 33594 US

01252007 No Chg-NP CR2E037 (4/06)

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4. FEI Number
59-2345431
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HUDSON, JONATHAN
4607 HUDSON OAKS LANE
DOVER, FL 33527

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	ROMERO, MANUEL A.
STREET ADDRESS	1006 LUMSDEN TRACE CIRCLE
CITY-ST-ZIP	VALRICO, FL 33594
TITLE	PD
NAME	HUDSON, JONATHAN D
STREET ADDRESS	4607 HUDSON OAKS LN.
CITY-ST-ZIP	DOVER, FL 33527
TITLE	STD
NAME	LOPEZ, FRANCISCO
STREET ADDRESS	14305 CLINTON STREET
CITY-ST-ZIP	DOVER, FL 33527
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/06/07-80074-012 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Jonathan Hudson JONATHAN HUDSON 1/30/07 813-759-6511
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #