## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # N00000007912** NORTH CONGREGATION OF JEHOVAH'S WITNESSES. PLANT CITY, FLORIDA, INC. Mailing Address

## **FILED** Aug 25, 2006 8:00 am Secretary of State

08-08-2006 90001 010 \*\*\*\*61.25

## Principal Place of Business 3202 NORTH MARYLAND AVENUE 3202 NORTH MARYLAND AVENUE PLANT CITY, FL 33563 PLANT CITY, FL 33563 07112006 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-1935586 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent THAYER, WILLIAM C DO NOT WRITE 1920 N FRONTAGE RD PLANT CITY, FL 33563 IN THIS SPACE 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. Signeture, typed or privacioname of registered again and title 4 appacame. (NOTE: Flaguered Agers signal 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Due by September 6, 2006 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TOLE THAYER WILLIAM C. NAME STREET ADORESS 1920 NORTH FRONTAGE ROAD CITY-ST-ZIP PLANT CITY, FL 33563 TITLE NAME FORBES, DONALD C STREET ADDRESS 805 KILGORE RD CTTY-ST-7/P PLANT CITY, FL 33567 TITLE NAME SUTTON, EDWARD E SR. STREET ADORESS 3913 WILDER ROAD DO NOT WRITE CITY-ST-ZIP PLANT CITY, FL 33565 TITLE IN THIS SPACE NALE STREET ADDRESS CITY-SI-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 occurate and that my signature shall have the tanne 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 chapter 617 and attachment with an address, with all other like empowered.

SIGNATURE: