

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004307

FILED  
May 02, 2007  
Secretary of State

**Entity Name:** PALM BEACH CANAL CONGREGATION OF JEHOVAH'S WITNESSES, INC.

**Current Principal Place of Business:**

5074 PALM BCH CANAL RD  
W PALM BCH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

5074 PALM BCH CANAL RD  
W PALM BCH, FL 33415

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

COUSINS, PATRICK S  
330 CLEMATIS STREET  
SUITE 218  
WEST PALM BEACH, FL 33401 US

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: D ( ) Delete  
Name: MAKI, ROGER  
Address: 3075 GRAND FLORA DRIVE  
City-St-Zip: GREENACRES, FL 33467

Title: D ( ) Delete  
Name: WILSON, MICHAEL  
Address: 945 BRIARWOOD DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D ( ) Delete  
Name: PETERSON, THOMAS  
Address: 1365 SUMMIT PINES BLVD.  
City-St-Zip: WEST PALM BEACH, FL 33415

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROGER MAKI

D

05/02/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date