

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004302

FILED
Aug 22, 2006
Secretary of State

Entity Name: MISSIONARY TEMPLE JEHOVAH SHAMMAH, INC.

Current Principal Place of Business:

27448 PINECREST LN.
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2903
BONITA SPRINGS, FL 34133

New Mailing Address:

FEI Number: 30-0034970 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

CHARLES, AGUIRRE
PO BOX 2903
BONITA SPRINGS, FL 34133 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: P () Delete
Name: ADA, AGUIRRE M
Address: PO BOX 2903
City-St-Zip: BONITA SPRING, FL 34133

Title: V () Delete
Name: CHARLES, AGUIRRE B
Address: PO BOX 2903
City-St-Zip: BONITA SPRINGS, FL 34133

Title: S () Delete
Name: MELISSA, GONZALEZ
Address: PO BOX 2903
City-St-Zip: BONITA SPRINGS, FL 34133

Title: T () Delete
Name: CATALINA, MARTINEZ
Address: 804 MONROE AVE.
City-St-Zip: LEHIGH ACRES, FL 33972

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES AGUIRRE

V

08/22/2006

Electronic Signature of Signing Officer or Director

Date