## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000004302

FILED Mar 09, 2007 Secretary of State

Entity Name: MISSIONARY TEMPLE JEHOVAH SHAMMAH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 27448 PINECREST LN. BONITA SPRINGS, FL 34135 **Current Mailing Address: New Mailing Address:** P.O. BOX 2903 BONITA SPRINGS, FL 34133 FEI Number: 30-0034970 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHARLES, AGUIRRE CHARLES, AGUIRRE 27448 PINÉCREST LN. PO BOX 2903 BONITA SPRINGS, FL 34133 US BONITA SPRINGS, FL 34135 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: 03/09/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition ADA, AGUIRRÉ M Name: Name: Address: PO BOX 2903 Address: City-St-Zip: BONITA SPRING, FL 34133 City-St-Zip: Title: () Delete Title: () Change () Addition Name: CHARLES, AGUIRRE B Name: Address: PO BOX 2903 Address: City-St-Zip: BONITA SPRINGS, FL 34133 City-St-Zip: Title: () Delete Title: () Change () Addition MELISSA, GONZALEZ Name: Name: Address: PO BOX 2903 Address: City-St-Zip: BONITA SPRINGS, FL 34133 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: CATALINA, MARTINEZ Name: 804 MONROE AVE. Address: Address: City-St-Zip: LEHIGH ACRES, FL 33972 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 03/09/2007