

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004347

FILED
Apr 28, 2008
Secretary of State

Entity Name: MONUMENT CONGREGATION OF JEHOVAH'S WITNESSES, JACKSONVILLE FLORIDA, INC.

Current Principal Place of Business:

9358 FT. CAROLINE RD.
JACKSONVILLE, FL 32225

New Principal Place of Business:

11225 ASHLEY MELISSE BLVD.
JACKSONVILLE, FL 32225

Current Mailing Address:

9358 FT. CAROLINE RD.
JACKSONVILLE, FL 32225

New Mailing Address:

12326 COBBLESTONE CIRCLE SOUTH
JACKSONVILLE, FL 322253795 US

FEI Number: 59-3841742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLE, FREDERICK M
12326 COBBLESTONE CIRCLE SOUTH
JACKSONVILLE, FL 322253795 US

Name and Address of New Registered Agent:

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: PD () Delete
Name: COLE, FREDERICK M
Address: 12326 COBBLESTONE CIRCLE SOUTH
City-St-Zip: JACKSONVILLE, FL 322253795

Title: STD () Delete
Name: FRASER, STEWART
Address: 13110 EBBTIDE CT.
City-St-Zip: JACKSONVILLE, FL 322252729

Title: D () Delete
Name: BRYANT, KELVIN B
Address: 553 MONTY LANE
City-St-Zip: JACKSONVILLE, FL 322256783

Title: D () Delete
Name: FAIRFAX, ROGER A
Address: 1727 FOREST LAKE CIR. WEST
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: RAMLOCHAN, ANDY
Address: 285 CARRIANN COVE TRAIL WEST
City-St-Zip: JACKSONVILLE, FL 322255181

Title: D () Delete
Name: STUBBS, DAVID C
Address: 1302 BLUE EAGLE WAY EAST
City-St-Zip: JACKSONVILLE, FL 322250763

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: D (X) Change () Addition
Name: FAIRFAX, ROGER A
Address: 1173 NESTING EAGLES LN.
City-St-Zip: JACKSONVILLE, FL 32225

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: FREDERICK M. COLE

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date