

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08948

FILED  
Feb 13, 2005  
Secretary of State

**Entity Name:** LIVE OAK CONGREGATION OF JEHOVAH'S WITNESSES, INC.

**Current Principal Place of Business:**

KINGDOM HALL OF JEHOYAH'S WITNESSES  
4468 NORTH US HWY 129  
LIVE OAK, FL 32060 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 431  
LIVE OAK, FL 32060 US

**New Mailing Address:**

**FEI Number:** 59-2378803

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JOHNSON, JOSEPH H  
13333 76TH TERRACE  
LIVE OAK, FL 32060 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: D ( ) Delete  
Name: GRINNELL, DAVID,  
Address: 13580 US HWY 90  
City-St-Zip: LIVE OAK, FL

Title: D ( ) Delete  
Name: HARDEN SR., ROBERT,  
Address: 11335 144TH ST.  
City-St-Zip: LIVE OAK, FL

Title: PD ( ) Delete  
Name: JOHNSON, JOSEPH H,  
Address: 13333 76TH TERRACE  
City-St-Zip: LIVE OAK, FL

Title: DS ( ) Delete  
Name: GIELENFELDT, DOUGLAS C  
Address: 1633 INGLESIDE DR. NE  
City-St-Zip: LIVE OAK, FL 32060

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

Title: D (X) Change ( ) Addition  
Name: GRINNELL, DAVID,  
Address: 13580 US HWY 90  
City-St-Zip: LIVE OAK, FL 32060

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

Title: PD (X) Change ( ) Addition  
Name: JOHNSON, JOSEPH H,  
Address: 13333 76TH TERRACE  
City-St-Zip: LIVE OAK, FL 32060

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 Section 119.07(3)(i), 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: JOSEPH H. JOHNSON

PRES

02/13/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date