

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21852

FILED
Apr 30, 2008
Secretary of State

Entity Name: DELRAY BEACH, FLORIDA, CONGREGATION OF JEHOVAH'S WITNESSES, INC.

Current Principal Place of Business:

12900 BARWICK RD
DELRAY BEACH, FL 33445 US

New Principal Place of Business:

Current Mailing Address:

2554 DORSON WAY
DELRAY BEACH, FL 33444 US

New Mailing Address:

FEI Number: 65-0046258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACOSTA, GERARDO
4708 N LEE RD
DELRAY BEACH, FL 33445 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: YOUNG, JOE N
Address: 602 SW 9TH CT
City-St-Zip: DELRAY BEACH, FL 33444

Title: S () Delete
Name: ACOSTM, GERARDO
Address: 4807 NORTH LEE RD
City-St-Zip: DELRAY BEACH, FL 33445

Title: P () Delete
Name: MURRAY, JAMES JR.,
Address: 2542 DORSON WAY
City-St-Zip: DELRAY BEACH, FL

Title: D () Delete
Name: GAGNE, THOMAS C
Address: 530 SANDPIPER CIR
City-St-Zip: DELRAY BEACH, FL 33445

Title: V () Delete
Name: POLIANDRO, CARMELO
Address: 2460 JUNIPER DR SUITE 103
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: OSMAN, RODGER
Address: 12375 SOUTH MILITARY TR SUITE 192
City-St-Zip: BOYNTON BEACH, FL 33436

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
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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: GERARDO ACOSTA

S

04/30/2008

Electronic Signature of Signing Officer or Director

Date