

2004 NCT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

04 DEC -9 PM 3:45

REINSTATEMENT 04



07062004 Chg-NP CR2E037 (10/03)

DOCUMENT # N26468 1. Entity Name WEST MIRAMAR CONGREGATION OF JEHOVAHS WITNESSES, INC.					
Principal Place of Business 1821 SW 97 AVE MIRAMAR, FL 33025 US		Mailing Address 1001 SW 95 TERRACE PEMBROKE PINES, FL 33025 US			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Zip		Country	
4. FEI Number 65-0048792				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WILLIAMS, TREVOR 9760 SW 13 STREET PEMBROKE PINES, FL 33025-3666			Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>TREVOR L. WILLIAMS, STD</u>		 <small>(Signature, typed or printed name of registered agent and title if applicable)</small>		DATE <u>12/3/04</u> <small>(NOT Registered Agent signature required when re-registering)</small>	
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	RICHARDSON, JOHN		NAME	DIRECTOR	
STREET ADDRESS	1001 SW 95 TER		STREET ADDRESS	PETER JARMAN	
CITY-ST-ZIP	PEMBROKE PINES, FL 33025		CITY-ST-ZIP	9000 SW 11 ST.	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PALMER, DAVID		NAME	100041972561	
STREET ADDRESS	2264 SW 119 AVE		STREET ADDRESS	12/23/04--01028--029 **175.00	
CITY-ST-ZIP	MIRAMAR, FL 33025		CITY-ST-ZIP	100041972561	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BUDRAM, STANFORD		NAME	10/19/04--01014--024 **51.25	
STREET ADDRESS	3396 FOXCROFT ROAD #203		STREET ADDRESS		
CITY-ST-ZIP	MIRAMAR, FL 33025		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CHAMBERS, KENNETH		NAME		
STREET ADDRESS	7301 RAMONA STREET		STREET ADDRESS		
CITY-ST-ZIP	MIRAMAR, FL 33023		CITY-ST-ZIP		
TITLE	STD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WILLIAMS, TREVOR		NAME		
STREET ADDRESS	9760 SW 13 STREET		STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES, FL 33025		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ROWAN, HERRICK		NAME		
STREET ADDRESS	8911 ANDORA DRIVE		STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD, FL 33025		CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other lines crossed out.

SIGNATURE: TREVOR L. WILLIAMS 10/12/04 (954)257-3544

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #