

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26756

FILED
Apr 03, 2012
Secretary of State

Entity Name: BAYSHORE CONGREGATION OF JEHOVAH'S WITNESSES, INC.

Current Principal Place of Business:

C/O KINGDOM HALL
17361 SLATER RD
NORTH FT. MYERS, FL 33917 US

New Principal Place of Business:

Current Mailing Address:

ROBERT A. OFFERMANN
838 HOLLYBERRY COURT
NORTH FORT MYERS, FL 33917

New Mailing Address:

FEI Number: 59-2819891 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

OFFERMANN, ROBERT A
838 HOLLYBERRY COURT
NORTH FT. MYERS, FL 33917 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
Name: MARK, DOROTHY D
Address: 8550 HART RD
City-St-Zip: N FT MYERS, FL 33917

Title: D
Name: MCCARTNEY, CHARLES H.
Address: 7510 MCDANIEL DR. NE
City-St-Zip: N. FT. MYERS, FL 33917

Title: VD
Name: HEIDIG, ALAN L
Address: 5710 LONGLEAF DRIVE
City-St-Zip: NORTH FORT MYERS, FL 33317

Title: D
Name: BERRY, DORSEY L JR
Address: P.O. BOX 3117
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: STD
Name: OFFERMANN, ROBERT A
Address: 838 HOLLYBERRY COURT
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D
Name: KEEGAN, DONALD J
Address: 5145 FOX LAKE DRIVE
City-St-Zip: N FT MYERS, FL 33917

I hereby 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 all other like empowered.

SIGNATURE: ROBERT A. OFFERMANN

STD

04/03/2012

Electronic Signature of Signing Officer or Director

_____ Date