

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34593

FILED
Apr 03, 2009
Secretary of State

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

Current Principal Place of Business:

2500 44TH STREET SW
NAPLES, FL 34116

New Principal Place of Business:

Current Mailing Address:

2500 44TH STREET SW
NAPLES, FL 34116

New Mailing Address:

PO BOX 990412
NAPLES, FL 34116

FEI Number: 65-0148837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IGNACE, WILLIAM P
2500 44TH STREET SW
NAPLES, FL 34116 US

Name and Address of New Registered Agent:

IGNACE, WILLIAM P PRES
2500 44TH STREET SW
NAPLES, FL 34116 US

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: WILLIAM P. IGNACE

04/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: IGNACE, WILLIAM P
Address: 2500 44TH STREET SW
City-St-Zip: NAPLES, FL 34116

Title: VD () Delete
Name: MACDONOUGH, PAUL
Address: 2410 24TH AVENUE NE
City-St-Zip: NAPLES, FL 34120

Title: SD () Delete
Name: RICE, KELLY H
Address: 940 CAPE MARCO DR
City-St-Zip: MARCO ISLAND, FL 34145

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:

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: WILLIAM P. IGNACE

PD

04/03/2009

Electronic Signature of Signing Officer or Director

Date