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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

TITLE

NAME

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NAME

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NAME

STREET ADDRESS

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CITY-ST-ZIP

CITY-ST-ZIP

N35042

(3)

MELALEUCA CONGREGATION OF JEHOVAH'S WITNESSES, I NC.

Principal Place of Business Mailing Address 3140 MELALEUCA LANE %DAVID E SMITH 3. Date Incorporated or Qualified LAKE WORTH FL 33461 3079 MARINER WAY *1/*06/1989 LAKE WORTH FL 33462 4. FEI Number Applied For 59-4840616 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Sulte, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 ☐ Yes 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SMITH, DAVID E Street Address (P.O. Box Number is Not Acceptable) 3079 MARINER WAY 83 LAKE WORTH FL 33462 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ Addition DELETE Change TITLE ΡD 1.1 TITLE **SMITH, DAVID E** NAME 1.2 NAME 3079 MARINER WAY STREET ADDRESS 1.3 STREET ADDRESS ake worth fl CITY-ST-ZIP 14 CITY-ST-7/P DELETE Change Addition TITLE 2.1 TITLE **GRIFFIS, JAMES H** NAME 2.2 NAME 8327 WACCAMAW LN STREET ADDRESS 2.3 STREET ADDRESS AKE WORTH FL CITY+ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME **NE**ELEY, DANIEL L. 3.2 NAME 2330 LANTANA ROAD LOT 5E STREET ADDRESS 3.3 STREET ADDRESS LANTANA FL CITY-ST-ZIP 3.4. CITY - ST-ZIP

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CłTY - ST - ZIP

4.4 CITY-ST-ZIP

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May 20 1998 8:00am

Secretary of State