

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48556

FILED
Mar 01, 2007
Secretary of State

Entity Name: THE MIAMI FLORIDA CONGREGATION OF JEHOVAH'S WITNESSES, INC.

Current Principal Place of Business:

P.O. BOX 924372
HOMESTEAD, FL 33092

New Principal Place of Business:

670 SE 18 LANE
HOMESTEAD, FL 33033

Current Mailing Address:

P.O. BOX 924372
HOMESTEAD, FL 33092

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MORRIS, MAXWELL S JR
670 SE 18TH LANE
HOMESTEAD, FL 33033 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: MILLER, ROBERT B.,
Address: 14341 POLK STREET
City-St-Zip: MIAMI, FL

Title: PD () Delete
Name: MORRIS, MAXWELL S III
Address: 20455 SW 264TH STREET
City-St-Zip: HOMESTEAD, FL 33031

Title: D () Delete
Name: KARRIS, ALLEN A.,
Address: 2032 SW 124TH PL
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: MORRIS, MAXWELL S JR
Address: 670 SE 18TH LANE
City-St-Zip: HOMESTEAD, FL 33033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DICK, ANDREW,
Address: 6814 SW 139 PLACE
City-St-Zip: MIAMI, FL 33183

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 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: MAX MORRIS, JR.

SD

03/01/2007

Electronic Signature of Signing Officer or Director

Date