


2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

Page 1 of 2

FILED

07 APR 23 AM 8:36

CLERK OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N48831					
1. Entity Name THE ORLANDO FLORIDA CONGREGATION OF JEHOVAH'S WITNESSES, INC.					
Principal Place of Business 1327 LOWRIE AVE. ORLANDO, FL 32805			Mailing Address 1327 LOWRIE AVE. ORLANDO, FL 32805		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number NOT APPLICABLE	
				Applied For 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		
MILLER, RUFUS 1327 LOWRIE AVE. ORLANDO, FL 32805			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$122.50		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLER, RUFUS 1327 LOWRIE AVE. ORLANDO, FL 32805	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PLAUMANN, LAWRENCE 2664 CLEAR COVE LANE ORLANDO, FL 32805	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RICHTER, RAY 5215 INDIAN HILL ROAD ORLANDO, FL 32808	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	600102651426 05/16/07--01043--018 **122.50
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE: Max Wright Attorney for Rufus Miller Date: 4-3-07 Daytime Phone #: 407-295-4701
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: MAX P. WRIGHT

24/27

Page 2082

LAW OFFICES
Max P. Wright
4445 EDGEWATER DRIVE
ORLANDO, FLORIDA
32804
(407) 295-4701

April 19, 2007

Corporate Records Bureau
Division of Corporations
Department of State
P. O. Box 6327
Tallahassee, Florida 32314

Re: CORPORATION

Gentlemen:

I hereby request a waiver of the reinstatement fee for the above referenced Non-Profit Religious Corporation since client has no record of having received anticipatory notice. Herewith attached is our firm check for the amount of \$122.50 representing the yearly fee for 2006 & 2007.

Filing Fee for 2 years: \$122.50

Very truly yours,



Max P. Wright, Esq.
encls.