## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Mar 30, 2007 8:00 am Secretary of State DOCUMENT # N93000000121 03-30-2007 90146 008 \*\*\*\*61.25 SOUTH CONGREGATION OF JEHOVAH'S WITNESSES, LAKE CITY, FLORIDA, INC. Principal Place of Business Mailing Address 1811 SW GRANDVIEW ST. 744 SW GRANDVIEW ST. LAKE CITY FL 32025 LAKE CITY FL 32025 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) Applied For City & State City & State 4. FEI Number 59-2390985 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STEVENS, WILLIAM R Street Address (P.O. Box Number is Not Acceptable) 744 SW GRANDVIEW ST. LAKE CITY FL 32025 Zip Code FL 8. The above named onlity 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 DATE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution Due By May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE D IIIU D ☐ Change Addition | X Delete NAMI NAME ELLIS, HARRY T ASA B SHARP STREET LADDRESS STREET ADDRESS 268 SW WOODVIEW WAY 192 SW MELON CT CHY ST ZIP CUY-S1-7IP LAKE CITY FL 32024 LAKE CITY FL 32024 XX Delete шп Change ☐ Addition THE NAME NAME TOMPKINS, DAVID L STREET ADDRESS STREET ADDRESS 317 SW JONATHAN WAY LAKE CITY FL 32025 CITY-ST-ZIP CITY-ST-ZIP IHIE Delete THE D ☐ Addition NAME NAM BROWN, WILBER STREET ADDRESS P.O. BOX 2247 N/A STREE! ADDRESS CHY ST ZIP CITY - ST- 7IP LAKE CITY FL 32056 ☐ Addition ▼ Change THE ☐ Delete TITLE S NAME NAME BENFORD, CHRIS E STRUET ADDRESS STREET ADDRESS 537 SW BRANDY WAY CHY ST ZIP CHY ST 7P LAKE CITY FL 32024 ☐ Addition ☐ Delete ☐ Change TITLE TITLE STEVENS, WILLIAM R NAMI STREET ADDRESS STRUET ADDRESS 744 SW GRANDVIEW ST. CHY ST ZIP CITY-S1-ZIP LAKE CITY FL 32025 Delete ☐ Change Addition ши. TITLE NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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.

WILLIAM R STEVENS SIGNATURE: 4

3/19/2007 386-752-7018