2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005683

FILED May 01, 2005 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

401 EXECUTIVE CENTER DRIVE 4501 AUSTRALIAN AVENUE WEST PALM BEACH, FL 33407 A113

WEST PALM BEACH, FL 33401

New Mailing Address: Current Mailing Address:

401 EXECUTIVE CENTER DRIVE 4501 AUSTRALIAN AVENUE A113 WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33401

FEI Number: 65-0503694 FEI Number Applied For () FEI Number Not Applicable ()

Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NORRIS, KEVIN 401 EXECUTIVE CENTER DRIVE

4510 AUSTRALIAN AVENUE US APT. A113 WEST PALM BEACH, FL 33407

WEST PALM BEACH, FL 33407 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.

WALKER, LANCE

SIGNATURE: WALKER, LANCE 05/01/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

NORRIS, KEVIN WALKER, LANCE Name: Name:

401 EXECUTIVE CENTER DRIVE, #113 Address: 4501 AUSTRALIAN AVENUE Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33407

Title: () Delete Title: () Change () Addition

Name: BROWN, JOHN T Name: Address: 1331-9TH COURT Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

WILLIAMS, CALVIN Name: WILLIAMS, CALVIN Name: 300 ONTARIO PLACE 300 ONTARIO PLACE Address: Address:

City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LANCE WALKER D 05/01/2005