

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

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AND  
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95 MAR 23 PM 12:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N94000002237 (5)

1. Corporation Name

EAST SPRING HILL CONGREGATIONS OF JEHOVAH'S WITNESSES, INC.

Principal Place of Business

Mailing Address

2283 RENTON LANE  
SPRING HILL FL 34609

2283 RENTON LANE  
SPRING HILL FL 34609

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

05/02/1994

4. FEI Number

Applied For

Not Applicable

59-2375985

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Nonprofit with IRS 501(c)(3)  
Tax Exempt Status

☒

\$68.75 Supplemental  
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DURKEE, HOWARD  
2283 RENTON LANE  
SPRING HILL FL 34609

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME GENOVESE, MICHAEL  
STREET ADDRESS 13140 JESSICA DR  
CITY-ST-ZIP SPRING HILL FL 34609

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE VD  
NAME GREVES, JEFF  
STREET ADDRESS 15376 OAKCREST CIR  
CITY-ST-ZIP SPRING HILL FL 34609

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE SD  
NAME WILLARD, JAMES  
STREET ADDRESS 1162 LIBBY RD  
CITY-ST-ZIP SPRING HILL FL 34609

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE TD  
NAME VONICK, GARY  
STREET ADDRESS 14133 INDIGO ST  
CITY-ST-ZIP SPRING HILL FL 34609

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE D  
NAME BLASER, DAVID  
STREET ADDRESS 13312 DRYSDALE ST  
CITY-ST-ZIP SPRING HILL FL 34609

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE D  
NAME COOK, THOMAS N  
STREET ADDRESS 6458 JAMAICA RD  
CITY-ST-ZIP SPRING HILL FL 34606

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL GENOVESE

3/16/95

Date

Chapter 11 Item 8