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FILED

Apr 18 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
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

2283 RENTON LANE  
SPRING HILL FL 34609

Mailing Address

2283 RENTON LANE  
SPRING HILL FL 34609-37653. Date Incorporated or Qualified  
05/02/19943a. Date of Last Report  
03/21/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City &amp; State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City &amp; State

28

Zip

Country

29

30

4. FEI Number

59-2375965

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☒ No

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 617.0502 and 617.1508, 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 617.0503, 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

TITLE PD ☐ DELETE  
NAME GENOVESE, MICHAEL  
STREET ADDRESS 13140 JESSICA DR  
CITY-ST-ZIP SPRING HILL FL 34609TITLE VD ☐ DELETE  
NAME GREVES, JEFF  
STREET ADDRESS 15376 OAKCREST CIR  
CITY-ST-ZIP SPRING HILL FL 34609TITLE SD ☐ DELETE  
NAME WILLARD, JAMES  
STREET ADDRESS 1351 MARKHAM AVE  
CITY-ST-ZIP SPRING HILL FLTITLE TD ☐ DELETE  
NAME VONICK, GARY  
STREET ADDRESS 1090 TRINIDAD AVE  
CITY-ST-ZIP SPRING HILL FLTITLE D ☐ DELETE  
NAME BLASER, DAVID  
STREET ADDRESS 13312 DRYSDALE ST  
CITY-ST-ZIP SPRING HILL FL 34609TITLE D ☐ DELETE  
NAME COOK, THOMAS N  
STREET ADDRESS 6458 JAMAICA RD  
CITY-ST-ZIP SPRING HILL FL 34606

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP6.1 TITLE ☒ Change ☐ Addition  
6.2 NAME D  
6.3 STREET ADDRESS COOK, THOMAS N.  
6.4 CITY-ST-ZIP 5145 BONE LANE  
BROOKSVILLE, FLORIDA 34609

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

MICHAEL GENOVESE

4/10/97 (352) 686-8958

Daytime Phone # 0068493

CP2E037 (9/96)