

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003257

FILED  
Jan 31, 2009  
Secretary of State

**Entity Name:** BAY PINES CONGREGATION OF JEHOVAH'S WITNESSES, INC.

**Current Principal Place of Business:**

12622 PARK BLVD.  
SEMINOLE, FL 33776

**New Principal Place of Business:**

**Current Mailing Address:**

10036 63RD AVENUE N.  
#16  
ST PETERSBURG, FL 33708

**New Mailing Address:**

**FEI Number:** 59-3327586      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SLEPETZ, F. THOMAS  
10036 63RD AVENUE N.  
#16  
ST PETERSBURG, FL 33708 US

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

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: MARTINOTTI JR., JOHN C  
Address: 10256 51ST AVE. N.  
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: STD ( ) Delete  
Name: SLEPETZ, F. THOMAS  
Address: 10036 63RD AVENUE N.  
City-St-Zip: ST PETERSBURG, FL 33708

Title: PD ( ) Delete  
Name: PROVENZANE, RICHARD A  
Address: 13843 ANTIGUA DR.  
City-St-Zip: SEMINOLE, FL 33776

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: PROVENZANE, RICHARD A  
Address: 13452 RIDGELAND DRIVE  
City-St-Zip: SEMINOLE, FL 33776

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: F. THOMAS SLEPETZ

STD

01/31/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date