

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000003367

1. Entity Name

EAST RIDGE CONGREGATION OF JEHOVAH'S WITNESSES,

FILED
Feb 22, 2000 8:00 am
Secretary of State

02-22-2000 90016 026 ****61.25

Principal Place of Business

Mailing Address

5250 PROCTOR ROAD
SARASOTA FL 34233

437 EAST LAKE DR
SARASOTA FL 34232-1917
US

015025



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NEW # 59-2832779

65-0839400

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BALL, JOHN B
437 EAST LAKE DRIVE
SARASOTA FL 34232

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
D	EMSHOFF, KENNETH	4881 BACCHARIS WAY	SARASOTA FL 34241	<input type="checkbox"/> Delete			
D	COOK, ROBERT	4904 RENO DR	SARASOTA FL 34233	<input type="checkbox"/> Delete			
DRA	DAMRON, DONALD	437 EAST LAKE DR	SARASOTA FL 34232	<input type="checkbox"/> Delete			
				<input type="checkbox"/> Delete			
				<input type="checkbox"/> Delete			
				<input type="checkbox"/> Delete			

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
D	ROBERT COOK	5206 FOXCROFT Ct.	SARASOTA FL 34232	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D/R	JOHN BALL	437 E. LAKE DR.	SARASOTA FL 34232	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/15/00

CR2E037 (9/99)