2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2021
Secretary of State
1728375865CC

DOCUMENT# N21852

Entity Name: NORTH DELRAY BEACH CONGREGATION OF JEHOVAH'S WITNESSES, INC.

Current Principal Place of Business:

12900 BARWICK RD
BOYNTON BEACH, FL 33436

Current Mailing Address:

12929 COCOA PINE DR.
BOYNTON BEACH, FL 33436 US

FEI Number: 65-0046258

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GIONFRIDDO, DARBE
3756 N.W. 8 ST.
DELRAY BEACH, FL 33445 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.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	D
Name	YOUNG, JOE N
Address	602 SW 9TH CT
City-State-Zip:	DELRAY BEACH FL 33444

Title	PRES
Name	DIREDA, CHARLES
Address	12929 COCOA PINE DR.
City-State-Zip:	BOYNTON BEACH FL 33436

Title	DIRECTOR
Name	AUGUSTE, JEAN-FRANTZ
Address	12925 CLIFTON DR.
City-State-Zip:	BOCA RATON FL 33428

Title	DIRECTOR
Name	SCUNGIO, ALBERT
Address	5578 ROYAL LAKE CIR.
City-State-Zip:	BOYNTON BEACH FL 33437

Title	SEC
Name	GIONFRIDDO, DARBE
Address	3756 N.W. 8 ST.
City-State-Zip:	DELRAY BEACH FL 33445

Title	D
Name	POLIANDRO, CARMELO
Address	2460 JUNIPER DR. #103
City-State-Zip:	DELRAY BEACH FL 33445

Title	VP
Name	GIONFRIDDO, GARY
Address	12375 S. MILITARY TRAIL 28
City-State-Zip:	BOYNTON BEACH FL 33436

Title	DIRECTOR
Name	VALVERDE, ANGELO
Address	5018 SOLAR POINT DR.
City-State-Zip:	GREENACRES FL 33463

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: DARBE GIONFRIDDO SEC 02/28/2021

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SEFFER, BRIAN
Address	5672 EAGLE TRACE CT.
City-State-Zip:	LAKE WORTH FL 33463