

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005683

Entity Name: NORTHWOOD CONGREGATION OF JEHOVAH'S WITNESSES,
WEST PALM BEACH, FLORIDA, INC.**FILED**
May 05, 2022
Secretary of State
5415549023CC**Current Principal Place of Business:**3000 N. AUSTRALIAN AVENUE
WEST PALM BEACH, FL 33401**Current Mailing Address:**3000 N. AUSTRALIAN AVENUE
WEST PALM BEACH, FL 33401 US**FEI Number: 65-0503694****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FOSTER, MICHAEL
2125 WARE DRIVE
WEST PALM BEACH, FL 33409 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: MICHAEL FOSTER****05/05/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	FOSTER, MICHAEL
Address	2125 WARE DRIVE
City-State-Zip:	WEST PALM BEACH FL 33409

Title	V
Name	HARRAWAY, JOHN
Address	AUSTRALIAN AVE
City-State-Zip:	WEST PALM BEACH FL 33407

Title	S
Name	WILLIAMS , CALVIN SR.
Address	300 ONTARIO PLACE
City-State-Zip:	WEST PALM BEACH FL 33409

Title	DIRECTOR
Name	WILLIAMS , CALVIN SR.
Address	300 ONTARIO PLACE
City-State-Zip:	WEST PALM BEACH FL 33409

Title	DIRECTOR
Name	HARRAWAY, JOHN
Address	AUSTRALIAN AVE.
City-State-Zip:	WEST PALM BEACH FL 33407

Title	DIRECTOR
Name	FOSTER, MICHAEL
Address	2125 WARE DRIVE
City-State-Zip:	WEST PALM BEACH FL 33409

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: CALVIN WILLIAMS**SECRETARY****05/05/2022**

Electronic Signature of Signing Officer/Director Detail

Date