

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005683

Entity Name: NORTHWOOD CONGREGATION OF JEHOVAH'S WITNESSES,
WEST PALM BEACH, FLORIDA, INC.**FILED**
Apr 10, 2020
Secretary of State
9093504587CC**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:**WALKER, LANCE R
830 30TH STREET
WEST PALM BEACH, FL 33407 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	P
Name	WALKER, LANCE R
Address	830 30TH STREET
City-State-Zip:	WEST PALM BEACH FL 33407

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

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	DARRYL , WILSON G
Address	1008 GREEN PINE BLVD E3
City-State-Zip:	WEST PALM BEACH FL 33409

Title	DIRECTOR
Name	AARONS, KEON
Address	117 EAST TIFFANY DRIVE #3
City-State-Zip:	WEST PALM BEACH FL 33407

Title	DIRECTOR
Name	ARCHER, MARVIN
Address	423 46TH STREET
City-State-Zip:	WEST PALM BEACH FL 33407

Title	DIRECTOR
Name	UHRIG , PETER
Address	627 36TH STREET
City-State-Zip:	WEST PALM BEACH FL 33407

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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 SR.**SECRETARY****04/10/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	HORTON, ELROY
Address	427 46TH STREET
City-State-Zip:	WEST PALM BEACH FL 33407