

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006564

FILED
Jan 15, 2009
Secretary of State

Entity Name: REGIONAL BUILDING COMMITTEE OF JEHOVAH'S WITNESSES, INC.

Current Principal Place of Business:

2821 ROUTE 22
PATTERSON, NY 125632237

New Principal Place of Business:

Current Mailing Address:

2821 ROUTE 22
PATTERSON, NY 125632237

New Mailing Address:

FEI Number: 45-0463763 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MOODY, JIM H
555-B N. 15TH ST
IMMOKALEE, FL 34142 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: P () Delete
Name: WOODY, CHARLES I
Address: 2821 ROUTE 22
City-St-Zip: PATTERSON, NY 125632237

Title: VP () Delete
Name: NONKES, WILLIAM H
Address: 2821 ROUTE 22
City-St-Zip: PATTERSON, NY 125632237

Title: S () Delete
Name: PANKONIN, GARY
Address: 2821 ROUTE 22
City-St-Zip: PATTERSON, NY 125632237

Title: T () Delete
Name: SHUSTER, ALLEN E
Address: 2821 ROUTE 22
City-St-Zip: PATTERSON, NY 125632237

Title: ASAT () Delete
Name: BUCHANAN, DARRELL
Address: 2821 ROUTE 22
City-St-Zip: PATTERSON, NY 125632237

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: WILLIAM H NONKES

VP

01/15/2009

Electronic Signature of Signing Officer or Director

Date