

**2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000006564

**FILED  
Apr 18, 2014  
Secretary of State  
CC9135524270**

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

**Current Principal Place of Business:**

2821 ROUTE 22  
PATTERSON, NY 12563-2237

**Current Mailing Address:**

2821 ROUTE 22  
PATTERSON, NY 12563-2237

**FEI Number: 45-0463763**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MOODY, JIM H  
555-B N. 15TH ST  
IMMOKALEE, FL 34142 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            PRESIDENT  
Name            WOODY, CHARLES I  
Address        2821 ROUTE 22  
City-State-Zip: PATTERSON NY 12563-2237

Title            VP  
Name            NONKES, WILLIAM H  
Address        2821 ROUTE 22  
City-State-Zip: PATTERSON NY 12563-2237

Title            ASAT  
Name            CASTELLANI, PAUL  
Address        2821 ROUTE 22  
City-State-Zip: PATTERSON NY 12563-2237

Title            TREASURER  
Name            SHUSTER, ALLEN E  
Address        2821 ROUTE 22  
City-State-Zip: PATTERSON NY 12563-2237

Title            SECRETARY  
Name            BUCHANAN, DARRELL  
Address        2821 ROUTE 22  
City-State-Zip: PATTERSON NY 12563-2237

*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: WILLIAM H. NONKES**

**VICE PRESIDENT**

**04/18/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date