


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2005 08:00 AM
Secretary of State

DOCUMENT # N17991

1. Entity Name
 WATCHTOWER BIBLE AND TRACT SOCIETY OF FLORIDA, INC.



Principal Place of Business Mailing Address
 900 RED MILLS RD 900 RED MILLS RD
 WALLKILL, NY 12589-3223 US WALLKILL, NY 12589-3223 US

DO NOT WRITE IN THIS SPACE



01252005 No Chg-NP CR2E037 (10/03)

4. FEI Number 58-1711312	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOODY, JIM H
 1001 LEHIGH EAST RD
 LEHIGH ACRES, FL 33972

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PEARSON, LEONARD R 800 RED MILLS RD WALLKILL, NY 125893224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TURCOT, MAURICE C 200 WATCHTOWER RD PATTERSON, NY 125639205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RODRIGUEZ, ALEJANDRO G 800 RED MILLS RD WALLKILL, NY 125893224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD QUESTELL, MARK L 124 COLUMBIA HEIGHTS BROOKLYN, NY 112011698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KREBS, DONALD R 124 COLUMBIA HEIGHTS BROOKLYN, NY 112011698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOODY, JIM H 1001 LEHIGH EAST RD LEHIGH ACRES, FL 33972

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 02/24/05-80065-013 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark L. Questell Mark L. Questell 1/26/05 (845) 744-9810
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
 Secretary & Treasurer