

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708808

FILED
Jan 15, 2009
Secretary of State

Entity Name: CONGREGATION SCHAARAI ZEDEK, INC.

Current Principal Place of Business:

3303 W. SWANN AVE.
TAMPA, FL 336094643 US

New Principal Place of Business:

Current Mailing Address:

3303 W. SWANN AVE.
TAMPA, FL 336094643 US

New Mailing Address:

FEI Number: 59-1394424 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEIGHLEY, BARBARA J
3303 W SWANN AVE
TAMPA, FL 33609 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: WADLER, JOAN
Address: 16201 GLENURY CT.
City-St-Zip: TAMPA, FL 33625 US

Title: T () Delete
Name: WEINER, ALAN
Address: 4513 W. ROSEMERE RD.
City-St-Zip: TAMPA, FL 33609

Title: VP () Delete
Name: FELSENTHAL, HARRY
Address: 1510 CANNONADE CT.
City-St-Zip: LUTZ, FL 33549

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:

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: BARBARA J KEIGHLEY

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01/15/2009

Electronic Signature of Signing Officer or Director

_____ Date