

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714320

FILED
Jan 03, 2012
Secretary of State

Entity Name: MENORAH CENTER, INC.

Current Principal Place of Business:

250 58TH STREET NORTH
ST. PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

250 58TH STREET NORTH
ST. PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 59-1268962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, BARBARA J
250 58TH STREET N
SAINT PETERSBURG, FL 33710 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: D
Name: JACOB, LUSKI RABBI
Address: 301 59TH ST N
City-St-Zip: ST PETERSBURG, FL 33710

Title: VPS
Name: BERKO, CECILE
Address: 14355 83RD PLACE NORTH
City-St-Zip: SEMINOLE, FL 33776

Title: P/T
Name: HALPRIN, DAVID
Address: 6681 49TH ST N.
City-St-Zip: PINELLAS PARK, FL

Title: D
Name: GILBERT, JERRY
Address: 301-61ST STREET, NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: VPS
Name: BENJAMIN, MARK MD
Address: 108 HARBORVIEW LANE
City-St-Zip: LARGO, FL 33770

Title: D
Name: BENJAMIN, MARILYN
Address: 6650 SUNSET WAY #419
City-St-Zip: ST. PETE BEACH, FL 33706

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: DAVID HALPRIN

P/T

01/03/2012

Electronic Signature of Signing Officer or Director

Date