

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2002 8:00 am
Secretary of State

04-21-2002 90876 012 ****61.25

DOCUMENT # 746704

1. Entity Name

GOLDA MEIR/KENT JEWISH CENTER, INC.

Principal Place of Business

Mailing Address

1955 VIRGINIA ST.
 CLEARWATER FL 34623

1955 VIRGINIA ST.
 CLEARWATER FL 34623

2. Principal Place of Business

2010 GREENBRIAR BOULEVARD

3. Mailing Address

Suite, Apt. #, etc.
2010 GREENBRIAR BOULEVARD

City & State
CLEARWATER FL

City & State
CLEARWATER FL

Zip **33763** Country **USA**

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4. FEI Number **59-1901486**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

~~SOLOMON, MINDY~~
~~1280 HEATHER RIDGE BLVD~~
~~DUNEDIN FL 34698~~

7. Name and Address of New Registered Agent

Name **NEWMARK, STANLEY**
 Street Address (P.O. Box Number is Not Acceptable) **3151 OYSTER BAYOU WAY**
 City **CLEARWATER** FL Zip Code **33759**

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.

SIGNATURE

Stanley Newmark

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	RUTENBERG, CHARLES	
STREET ADDRESS	3140 MASTERS DRIVE	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	KENT, REVA	
STREET ADDRESS	3136 MASTERS DRIVE	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	NEWMARK, STANLEY	
STREET ADDRESS	1280 HEATHER RIDGE BLVD	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	D	<input type="checkbox"/> Delete
NAME	RUTENBERG, CHARLES	
STREET ADDRESS	3262 HYDE PARK BLVD	
CITY-ST-ZIP	CLEARWATER FL 33761	
TITLE	T	<input type="checkbox"/> Delete
NAME	NEWMARK, ENID	
STREET ADDRESS	1280 HEATHER RIDGE BLVD	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NEWMARK, STANLEY	
STREET ADDRESS	3151 OYSTER BAYOU WAY	
CITY-ST-ZIP	CLEARWATER, FL 33759	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NEWMARK, ENID	
STREET ADDRESS	3151 OYSTER BAYOU WAY	
CITY-ST-ZIP	CLEARWATER, FL 33759	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Stanley Newmark

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)