

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 767873		
1. Entity Name JEWISH CONGREGATION OF MARCO ISLAND, INC.		

FILED

04 OCT 28 AM 11:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 991 WINTERBERRY DRIVE MARCO ISLAND, FL 34145 US	Mailing Address 991 WINTERBERRY DRIVE MARCO ISLAND, FL 34145 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

10212004 REIN-NP CR2E099 (6/04)

6. Name and Address of Current Registered Agent BLOOM, MILLARD D 191 MINOSA COURT MARCO ISLAND, FL 34145	
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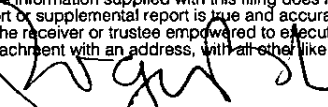
7. Name and Address of New Registered Agent	
Name	Roger Blau
Street Address (P.O. Box Number is Not Acceptable)	1074 Dill Ct.
City	Marco Island FL
Zip Code	34145

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	Roger Blau, President	10-22-04
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 After January 1, 2005, Fee will be \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	D ☒ Delete
NAME	SLAVICH, MIRIAM
STREET ADDRESS	1221 MULBERRY COURT
CITY-ST-ZIP	MARCO ISLAND, FL 33937
TITLE	President ☐ Delete
NAME	BLAU, ROGER
STREET ADDRESS	1074 DILL COURT
CITY-ST-ZIP	MARCO ISLAND, FL 34145
TITLE	PD ☒ Delete
NAME	BLOOM, MILLARD
STREET ADDRESS	1191 MIMOSA COURT
CITY-ST-ZIP	MARCO ISLAND, FL 34145
TITLE	1VP ☒ Delete
NAME	SPIRAK, JERRY
STREET ADDRESS	9734 MULBERRY LANE
CITY-ST-ZIP	NAPLES, FL 34114
TITLE	AT ☐ Delete
NAME	KOSLOW, ARNOLD
STREET ADDRESS	845 COLLIER CT 402
CITY-ST-ZIP	MARCO ISLAND, FL 34145
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	Treasurer ☐ Change ☒ Addition
NAME	Larry Ast
STREET ADDRESS	1620 Cayman CT
CITY-ST-ZIP	Naples, FL 34119
TITLE	1st VP ☐ Change ☒ Addition
NAME	Ralph Segall
STREET ADDRESS	3374 Cerreto CT.
CITY-ST-ZIP	Naples, FL 34109
TITLE	2VP ☐ Change ☒ Addition
NAME	Sue R. Baum
STREET ADDRESS	930 Cape Marco Dr. #501
CITY-ST-ZIP	Marco Island, FL 34145
TITLE	☐ Change ☐ 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: 	10-22-04 239-642-0800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #