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Apr 16 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 769404 (5)
1. Corporation Name
KISSIMMEE JEWISH COMMUNITY, INC.



Principal Place of Business Mailing Address
CONGREGATION SHALOM ALEICHEM P O BOX 424211 KISSIMMEE FL 34742-4211 US

3. Date Incorporated or Qualified 07/15/1983
3a. Date of Last Report 04/11/1996

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

4. FEI Number 59-2418727 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
ROTHFELD, CINDY ESQ.
14537 OCONEE LANE
ORLANDO FL 32837

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD WOLFE, PAT 1068 SALSONA AVE. KISSIMMEE FL	<input type="checkbox"/> DELETE	1.1 TITLE PRESIDENT ROBERT ROTHFELD 14537 OCONEE LANE ORLANDO, FL 32837
NAME	PD LANGER, HENRY L. 2416 RAVENDALE COURT KISSIMMEE FL	<input checked="" type="checkbox"/> DELETE	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
STREET ADDRESS	T LOWENSTEIN, CAROL S 2319 KELLIE ANN COURT KISSIMMEE FL	<input type="checkbox"/> DELETE	2.1 TITLE VICE President MAE WHITLOW 14525 OCONEE LANE ORLANDO, FL 32837
CITY-ST-ZIP	VD SEITZ, ED 651 MC KINLEY COURT KISSIMMEE FL 34758	<input type="checkbox"/> DELETE	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
CITY-ST-ZIP		<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
		<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
		<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
		<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Carol S. Lowenstein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/97
Date
407-846-6302
407-847-4791
Daytime Phone
0089905

CR2E037 (9/96)