

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001946

FILED
Apr 22, 2008
Secretary of State

Entity Name: CONGREGATION B'NAI AVRAHAM, INC.

Current Principal Place of Business:

11924 FOREST HILL BLVD SUITE 22-430
WELLINGTON, FL 33414

New Principal Place of Business:

12794 W. FOREST HILL BLVD.
6
WELLINGTON, FL 33414

Current Mailing Address:

11924 FOREST HILL BLVD SUITE 22-430
WELLINGTON, FL 33414

New Mailing Address:

12794 FOREST HILL BLVD
6
WELLINGTON, FL 33414

FEI Number: 26-0155507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOHAN, MELVIN DR.
11924 FOREST HILL BLVD SUITE 22-430
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

KOHAN, MELVIN DR.
12794 FOREST HILL BLVD
6
WELLINGTON, FL 33414 US

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: MELVIN S. KOHAN

04/22/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KOHAN, MELVIN DR.
Address: 14701 DRAFT HORSE LANE
City-St-Zip: WELLINGTON, FL 33414

Title: D (X) Delete
Name: ABRAMS, SHARON
Address: 2780 NE 183RD STREET #1905
City-St-Zip: AVENTURA, FL 33160

Title: D (X) Delete
Name: CHASE, SHANA
Address: 18969 ALEXANDRA CIRCLE
City-St-Zip: WELLINGTON, FL 33414

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: MELVIN S. KOHAN

OFFI

04/22/2008

Electronic Signature of Signing Officer or Director

Date