


**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Jun 06, 2005 8:00 am**  
**Secretary of State**

04-26-2005 90129 019 \*\*\*\*61.25

DOCUMENT # N15164 1. Entity Name CONGREGATION BETH AM OF TAMPA, INC.			
Principal Place of Business 2030 W FLETCHER AVE TAMPA F 33612 US		Mailing Address 2030 W FLETCHER AVE TAMPA FL 33612 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent LEWIS, KATZ 8810 HEATHER GLEN CT TAMPA FL 33647		4. FEI Number 59-2678553 Applied For <input type="checkbox"/> Not Applicable	
7. Name and Address of New Registered Agent Name: Cartoon, Michael N. Street Address (P.O. Box Number is Not Acceptable): 6214 Troguois Court City: Odessa, FL Zip Code: 33556		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
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: <i>Michael N. Cartoon</i> Michael N. Cartoon 6/2/05 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: TD NAME: LEWIS, KATZ STREET ADDRESS: 8810 HEATHER GLEN CT CITY-ST-ZIP: TAMPA FL 33647 <input checked="" type="checkbox"/> Delete	TITLE: TD NAME: LEWIS, KATZ STREET ADDRESS: 8810 HEATHER GLEN CT CITY-ST-ZIP: TAMPA FL 33647 <input checked="" type="checkbox"/> Delete	TITLE: TD NAME: Cartoon, Michael N. STREET ADDRESS: 6214 Troguois CT CITY-ST-ZIP: ODESSA, FL 33556 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE: TD NAME: Cartoon, Michael N. STREET ADDRESS: 6214 Troguois CT CITY-ST-ZIP: ODESSA, FL 33556 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: P NAME: KAUFMANN, LILI STREET ADDRESS: 11111 CARROLLWOOD DR CITY-ST-ZIP: TAMPA FL 33618 <input checked="" type="checkbox"/> Delete	TITLE: P NAME: KAUFMANN, LILI STREET ADDRESS: 11111 CARROLLWOOD DR CITY-ST-ZIP: TAMPA FL 33618 <input checked="" type="checkbox"/> Delete	TITLE: P NAME: Aaeng, Lesley R. STREET ADDRESS: 6519 Grazing Lane CITY-ST-ZIP: ODESSA, FL 33556 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE: P NAME: Aaeng, Lesley R. STREET ADDRESS: 6519 Grazing Lane CITY-ST-ZIP: ODESSA, FL 33556 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: PP NAME: BREHM, BILL STREET ADDRESS: 13802 KHILANI CT CITY-ST-ZIP: TAMPA FL 33624 <input checked="" type="checkbox"/> Delete	TITLE: PP NAME: BREHM, BILL STREET ADDRESS: 13802 KHILANI CT CITY-ST-ZIP: TAMPA FL 33624 <input checked="" type="checkbox"/> Delete	TITLE: PP NAME: Kaufmann, Cili STREET ADDRESS: 11111 Carrollwood Dr. CITY-ST-ZIP: TAMPA, FL 33618 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE: PP NAME: Kaufmann, Cili STREET ADDRESS: 11111 Carrollwood Dr. CITY-ST-ZIP: TAMPA, FL 33618 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: PE NAME: ARENA, LESLEY STREET ADDRESS: 6519 GRAZING LANE CITY-ST-ZIP: ODESSA FL 33556 <i>Lesley Aaeng</i>	TITLE: PE NAME: ARENA, LESLEY STREET ADDRESS: 6519 GRAZING LANE CITY-ST-ZIP: ODESSA FL 33556 <i>Lesley Aaeng</i>	TITLE: PE NAME: Friedman, Cathy STREET ADDRESS: 508 Montrose Ave CITY-ST-ZIP: TAMPA, FL 33617 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE: PE NAME: Friedman, Cathy STREET ADDRESS: 508 Montrose Ave CITY-ST-ZIP: TAMPA, FL 33617 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VP NAME: FRIEDMAN, CATHY STREET ADDRESS: 508 MONTROSE AVE CITY-ST-ZIP: TAMPA FL 33617 <i>correct spelling</i>	TITLE: VP NAME: FRIEDMAN, CATHY STREET ADDRESS: 508 MONTROSE AVE CITY-ST-ZIP: TAMPA FL 33617 <i>correct spelling</i>	TITLE: VP NAME: Ziegler, Harold STREET ADDRESS: 29432 Allegro Dr CITY-ST-ZIP: Wesley Chapel, FL 33543 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE: VP NAME: Ziegler, Harold STREET ADDRESS: 29432 Allegro Dr CITY-ST-ZIP: Wesley Chapel, FL 33543 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VP NAME: MONACO, MICHAEL STREET ADDRESS: 14727 TALL TREE DR CITY-ST-ZIP: LUTZ FL 33549	TITLE: VP NAME: MONACO, MICHAEL STREET ADDRESS: 14727 TALL TREE DR CITY-ST-ZIP: LUTZ FL 33549	TITLE: VP NAME: Meier, Arthur STREET ADDRESS: 12115 Glencliff Circle CITY-ST-ZIP: TAMPA, FL 33626 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE: VP NAME: Meier, Arthur STREET ADDRESS: 12115 Glencliff Circle CITY-ST-ZIP: TAMPA, FL 33626 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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: <i>Michael N. Cartoon</i> Michael N. Cartoon 6/2/05 813-920-8930		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	

# ATTACHMENT

## Congregation Beth Am



Community  
Spirituality  
Tradition

**Rabbi**  
Brian H. Zimmerman

**Cantor**  
Victoria J. Silverman

**Religious School  
Administrator**  
Michael Gamson

**President**  
Lili Kaufmann

**Vice Presidents**  
Lesley Aceng  
Cathy Friedman  
Michael Monaco  
Eileen Poiley

**Recording Secretary**  
Janet Wasserberger

**Financial Secretary**  
Robert Winters

**Treasurer**  
Lewis Katz

**Members at Large**  
Ron Baruch  
Dee Beldyk  
Mel Tockman  
Mary Young

**Past Presidents**  
Bill Brehm  
Ken Young  
Ruth Klein  
Ellen H. Lorenzen  
Barry C. Kaufmann  
Marsha M. Sherman  
Maurice Shaw

**Men's Club  
President**  
Michael Monaco

**Sisterhood  
Interim President**  
Dianne Baruch

**Youth Group  
President**  
Jennifer Perman

attachment 66021816 —  
# N15164  
additional officers

Friedman, Lisa - VP.  
6608 Appaloosa Dr  
Tampa, FL 33625

Beldyk, Deborah - VP  
3801 Northgreen Ave. # 3802  
Tampa, FL 33624

Falkowitz, Steven - F.S.  
4960 Ebensburg Dr  
Tampa, FL 33647

Conley, Deborah - S.  
14905 N. Rome Ave  
Tampa, FL 33613