FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **N94000002036 (1)**

1. Corporation Name

SYNAGOGUE COUNCIL OF SARASOTA-MANATEE, INC.

Principal Place of Business	Mailing Address
1050 TUTTLE AVENUE SOUTH SARASOTA FL 34237	1050 TUTTLE AVENUE SOUTH SARASOTA FL 34237

3. Date Incorporated or Qualified: 04/22/1994
3a. Date of Last Report: 03/17/1995

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

4. FEI Number: 65-0485543 ☐ 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

KOBERNICK, SIDNEY
1050 TUTTLE AVENUE SOUTH
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name: MARTIN SONNENFELD
82 Street Address (P.O. Box Number is Not Acceptable): 1050 TUTTLE AVENUE SOUTH
83
84 City: SARASOTA FL 85 Zip Code: 34243

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: Martin Sonnenfeld — DATE
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	LEON, BEROTH		12 NAME		
STREET ADDRESS	7091 FAIRWAY BEND CIR		13 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		14 CITY-ST-ZIP		
TITLE	D	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	SEITMAN, MURRAY		22 NAME		
STREET ADDRESS	5644 COUNTRY LAKES DRIVE		23 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34243		24 CITY-ST-ZIP		
TITLE	D	☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME	MILTER, SANFORD		32 NAME		
STREET ADDRESS	7078 FAIRWAY BEND CIRCLE		33 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34243		34 CITY-ST-ZIP		
TITLE	D	☒ DELETE	41 TITLE		☐ Change ☐ Addition
NAME	KOBERNICK, SIDNEY		42 NAME		
STREET ADDRESS	5627 COUNTRY LAKES DRIVE		43 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34243		44 CITY-ST-ZIP		
TITLE	D	☒ DELETE	51 TITLE		☐ Change ☐ Addition
NAME	HUNTTING, GEOFFREY		52 NAME		
STREET ADDRESS	4428 GREENFIELD AVE		53 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		54 CITY-ST-ZIP		
TITLE	D	☐ DELETE	61 TITLE		☐ Change ☒ Addition
NAME	ROSALIND SICHEL		62 NAME		
STREET ADDRESS	4869 WILDPOINTE DR.		63 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34233		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: [signature] TREASURER — 4/10/96 — 941-351-6045
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (12/95)