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Feb 11 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 # **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 34237-8106

3. Date Incorporated or Qualified: 04/22/1994
3a. Date of Last Report: 03/13/1996

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

SONNEFELD, MARTIN
150 TUTTLE AVENUE SOUTH
SARASOTA FL 34243

10. Name and Address of New Registered Agent

81 Name: Lori Dreffin
82 Street Address (P.O. Box Number is Not Acceptable): 2453 Proctor Rd
83
84 City: Sarasota **FL** 85 Zip Code: 34231

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: Lori B. Dreffin — 2/4/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LEON, BEROTH		1.2 NAME		
STREET ADDRESS	7091 FAIRWAY BEND CIR		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SEITMAN, MURRAY		2.2 NAME		
STREET ADDRESS	5644 COUNTRY LAKES DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34243		2.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	MILTER, SANFORD		3.2 NAME		
STREET ADDRESS	7078 FAIRWAY BEND CIRCLE		3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34243		3.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SICHEL, ROSALIND		4.2 NAME		
STREET ADDRESS	4869 WILDEPOINTE DRIVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☒ Addition
NAME	Ellen Lenk		5.2 NAME	→	
STREET ADDRESS	4001 Oakley Greene		5.3 STREET ADDRESS		
CITY-ST-ZIP	Sarasota, FL 34235		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☒ Addition
NAME	Lori Dreffin		6.2 NAME	→	
STREET ADDRESS	2453 Proctor Road		6.3 STREET ADDRESS		
CITY-ST-ZIP	Sarasota, FL 34231		6.4 CITY-ST-ZIP		

CR2E037 (9/96)

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: Lori B. Dreffin — 2/5/97 — 941-924-1801