

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90091 043 ****61.25

DOCUMENT # N94000002036

1. Entity Name

SYNAGOGUE COUNCIL OF SARASOTA-MANATEE, INC.



Principal Place of Business

2209 75TH STREET W
BRADENTON FL 34209

Mailing Address

3015 SOUTHERN PKWY W
BRADENTON FL 34205

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0485543

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ELLIS, JONAS
3015 SOUTHERN PKWY W
BRADENTON FL 34205

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
SPITALNY, PAULA
1682 PINTAIL WAY
SARASOTA FL 34231 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
ROME, MILTON
7441 FAIRLINKS COURT
SARASOTA FL 34243 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
LESSER, ERWIN
5044 CREEKSIDE TRAIL
SARASOTA FL 34243 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
ELLIS, JONAS
3015 SOUTHERN PKWY
BRADENTON FL 34205 ☐ Delete

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Jonas Ellis
JONAS ELLIS

4/10/06

(941) 747-2423

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #