

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003632

1. Entity Name

CONGREGATION FOR HUMANISTIC JUDAISM, INC.

FILED
Feb 06, 2002 8:00 am
Secretary of State

02-06-2002 90003 041 ****61.25

Principal Place of Business

Mailing Address

~~7324 GOLF POINTE CIRCLE~~
~~SARASOTA FL 34243~~

~~7324 GOLF POINTE CIRCLE~~
~~SARASOTA FL 34243~~

same

1903 Northgate #112
Sarasota, FL 34234

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0674358

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HANDELMAN, ETTIE
7324 GOLF POINTE CIRCLE
SARASOTA FL 34243

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME HANDELMAN, ETTIE
STREET ADDRESS 7324 GOLF POINTE CIRCLE
CITY-ST-ZIP SARASOTA FL 34243 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME FOX, JOAN
STREET ADDRESS 1302 LINDINGS DRIVE 4325 Brandywine DR
CITY-ST-ZIP SARASOTA FL 34241 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD
NAME PELLETZ, BETTY
STREET ADDRESS 1448 GOLF OF MEXICO DR 3427 Winding Oaks DR
CITY-ST-ZIP LONGBOAT KEY FL 34228 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME PELLETZ, STANLEY
STREET ADDRESS 1445 GOLF OF MEXICO DR 3427 Winding Oaks DR
CITY-ST-ZIP LONGBOAT KEY FL 34228 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME KATZ, IRWIN
STREET ADDRESS 3406 WINDING OAKS DR
CITY-ST-ZIP LONGBOAT KEY FL 34228 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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:

SIGNATURE REQUIRED: ETTIE HANDELMAN 1/9/02 941-355-2223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)