

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 708808

**Entity Name:** CONGREGATION SCHAARAI ZEDEK, INC.

**Current Principal Place of Business:**

3303 W. SWANN AVE.  
TAMPA, FL 33609-4643

**Current Mailing Address:**

3303 W. SWANN AVE.  
TAMPA, FL 33609-4643 US

**FEI Number: 59-1394424**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KLEIN, TRACI  
3303 W SWANN AVE  
TAMPA, FL 33609 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SHIMBERG, SCOTT  
Address        2903 BAYSHORE VISTA DRIVE  
City-State-Zip: TAMPA FL 33611-5511

Title            VP, MEMBERSHIP & PROGRAMS  
Name            MARKOWITZ, CARLA  
Address        3936 DORAL DRIVE  
City-State-Zip: TAMPA FL 33634-7416

Title            TREASURER  
Name            WEINBREN, DON  
Address        4417 W CULBREATH AVE  
City-State-Zip: TAMPA FL 33609-4203

Title            EXECUTIVE DIRECTOR  
Name            LEVINE, MARC  
Address        4766 ROLLING GREEN DRIVE  
City-State-Zip: WESLEY CHAPEL FL 33543-6976

Title            VP, RELIGION EDUCATION & YOUTH  
Name            SINGER, ALLISON  
Address        5218 S JULES VERNE CT  
City-State-Zip: TAMPA FL 33611-4143

Title            VP, FUNDRAISING  
Name            SINGER, DAN  
Address        3605 W JETTON AVE  
City-State-Zip: TAMPA FL 33629-5109

Title            VP, ADMINISTRATION  
Name            WEISSMAN, CHARLES  
Address        16630 SEDONA DE AVILA  
City-State-Zip: TAMPA FL 33613-5230

Title            SECRETARY  
Name            SHEER, MELINDA  
Address        11307 CARROLLWOOD DRIVE  
City-State-Zip: TAMPA FL 33618-3703

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: MARC LEVINE**

**EXECUTIVE DIRECTOR**

**07/02/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date