

**2024 FLORIDA NOT FOR PROFIT CORPORATION 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            MARKOWITZ, CARLA  
Address        3303 WEST SWANN AVENUE  
City-State-Zip: TAMPA FL 33609

Title            TREASURER  
Name            SINGER, DAN  
Address        3303 WEST SWANN AVENUE  
City-State-Zip: TAMPA FL 33609

Title            EXECUTIVE DIRECTOR  
Name            LEVINE, MARC  
Address        3303 WEST SWANN AVENUE  
City-State-Zip: TAMPA FL 33609

Title            SECRETARY  
Name            POLENDER, ALLISON  
Address        3303 WEST SWANN AVENUE  
City-State-Zip: TAMPA FL 33609

*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**

**03/26/2024**

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

\_\_\_\_\_  
Date