

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717077

FILED
Mar 07, 2016
Secretary of State
CC8157951384

Entity Name: CONGREGATION OF REFORM JUDAISM, INC.

Current Principal Place of Business:

928 MALONE DR
ORLANDO, FL 32810

Current Mailing Address:

928 MALONE DR
ORLANDO, FL 32810

FEI Number: 59-0882965

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KANCHER, MICHAEL
928 MALONE DR
ORLANDO, FL 32810 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: MICHAEL KANCHER

03/07/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PP
Name DICTOR, LYNN
Address 3811 WIMBLEDON DRIVE
City-State-Zip: LAKE MARY FL 32746

Title S
Name GROSSMAN, BARBARA
Address 104 JUNIPER LANE
City-State-Zip: LONGWOOD FL 32779

Title PRESIDENT
Name BLECHMAN, MARK
Address P. O. BOX 149505
City-State-Zip: ORLANDO FL 32814

Title VP
Name ROBINSON, IAN
Address 2521 TUSCALOOSA TRAIL
City-State-Zip: WINTER PARK FL 32789

Title VP
Name GERBER, DORI
Address 1220 PINE NEEDLE COURT
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title VP
Name MCKENNA, SUSAN
Address 1621 HILLCREST AVENUE
City-State-Zip: WINTER PARK FL 32789

Title VP
Name LEVITT, MARK
Address 1673 GLEN EAGLES WAY
City-State-Zip: ORLANDO FL 32804

Title VP
Name SCHWAM WILCOX, CANY
Address 1173 WOODLAND TERRACE TRAIL
City-State-Zip: ALATAMONTE SPRINGS FL 32714

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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: SUSAN MCKENNA

PRESIDENT ELECT

03/07/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name MARGOLIS, BRIAN
Address 404 BARCLAY AVE
City-State-Zip: ALATAMONTE SPRINGS FL 32701

Title VP
Name LIEBLICH, CATHY
Address 3812 EMERALD ESTATES CIRCLE
City-State-Zip: APOPKA FL 32703

Title VP
Name JACOBSON, ROGER
Address 10452 OVERVIEW PT
City-State-Zip: GOTHA FL 34734