DOCUMENT# 717077	
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2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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

Name and Address of Current Registered Agent:

KANCHER, MICHAEL 928 MALONE DR ORLANDO, FL 32810 US Certificate of Status Desired: No

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 03/01,						
	Electronic Signature of Registered Agent		Date			
Officer/Director Detail :						
Title	S	Title	VP			
Name	LIEBLICH, CATHY	Name	ROBINSON, IAN			
Address	1832 MEETING PLACE #291	Address	2521 TUSCALOOSA TRAIL			
City-State-Zip:	ORLANDO FL 32814	City-State-Zip:	WINTER PARK FL 32789			
Title	VP	Title	VP			
Name	LEVITT, MARK	Name	SCHWAM WILCOX, CAMY			
Address	1673 GLEN EAGLES WAY	Address	1173 WOODLAND TERRACE TRAIL			
City-State-Zip:	ORLANDO FL 32804	City-State-Zip:	ALATAMONTE SPRINGS FL 32714			
Title	VP	Title	VP			
Name	ABRAMSON, DONNA	Name	SCHOTT, FRED			
Address	1880 DEMETREE DRIVE	Address	2056 HUTTON POINT			
City-State-Zip:	WINTER PARK FL 32789	City-State-Zip:	LONGWOOD FL 32779			
Title	VP	Title	VP			
Name	MITCH, BARNETT	Name	BECKER, HELENE			
Address	124 COBEL COURT	Address	390 GOLF BROOK CIRCLE APT 100			
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	LONGWOOD FL 32779			

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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: NANCY WALK

PRESIDENT

03/01/2021

Date

FILED Mar 01, 2021 Secretary of State 5865995587CC

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	VP	Title	VP
Name	LEVIE, ALLISON	Name	LEVIN, LISA
Address	1516 ASPENWOOD STREET	Address	5386 RED LEAF COURT
City-State-Zip:	WINTER SPRINGS FL 32708	City-State-Zip:	OVIEDO FL 32765
Title	PRESIDENT	Title	VP
Name	WALK, NANCY	Name	REIS, RICHARD
Address	2048 HUTTON POINT	Address	1166 N LAKE SYBELIA
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	MAITLAND FL 32751
Title	VP	Title	VP
Name	KUSHNER, ROBERT	Name	GERBER, DORI
Address	1418 SHELTER ROCK ROAD	Address	1220 PINE NEEDLE COURT
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ALTAMONTE SPRINGS FL 32714
Title	VP	Title	TREASURER
Name	ADELSON, ERIC	Name	STEINMETZ, MEGAN
Address	1307 BRIERCLIFF DRIVE	Address	2215 MARSH SEDGE LANE
City-State-Zip:	ORLANDO FL 32806	City-State-Zip:	WINTER PARK FL 32792
Title	VP		
Name	WHITE, JEAN		
Address	83 GENEVA DRIVE APT. 3641		

City-State-Zip: OVIEDO FL 32762