2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717077

Entity Name: CONGREGATION OF REFORM JUDAISM, INC.

FILED
Jan 10, 2017
Secretary of State
CC1945395786

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 01/10/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title SECRETARY Title PP

NameDICTOR, LYNNNameBLECHMAN, MARKAddress3811 WIMBLEDON DRIVEAddressP. O. BOX 149505City-State-Zip:LAKE MARY FL 32746City-State-Zip:ORLANDO FL 32814

Title VP Title PRESIDENT

Name ROBINSON, IAN Name MCKENNA, SUSAN

Address 2521 TUSCALOOSA TRAIL Address 1621 HILLCREST AVENUE
City-State-Zip: WINTER PARK FL 32789 City-State-Zip: WINTER PARK FL 32789

Title VP Title VP

Name LEVITT, MARK Name SCHWAM WILCOX, CANY

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 VI

Name MARGOLIS, BRIAN Name LIEBLICH, CATHY

Address 404 BARCLAY AVE Address 3812 EMERALD ESTATES CIRCLE

City-State-Zip: ALATAMONTE SPRINGS FL 32701 City-State-Zip: APOPKA FL 32703

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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 01/10/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP Title VP

Name MAROWITZ, ROBERTA Name KNUDSEN, KAREN

Address 951 NIBLICK DRIVE Address 525 OAK TERRACE

117

City-State-Zip: CASSELBERRY FL 32707

City-State-Zip: ALTAMONTE FL 32701

Title VP

Name HAYNES, FRANCINE

Address 508 WORTHINGTON LANE Name WEISER, ANA

Address 536 WOODLAND TERRACE BLVD

City-State-Zip: WINTER PARK FL 32789

City-State-Zip: ORI ANDO FL 23828

City-State-Zip: ORLANDO FL 32828

Title

VΡ