

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 11, 2013
Secretary of State
CC2865899758

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:

LANDEY, HAROLD
1421 CANAL POINT RD.
LONGWOOD, FL 32750 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 PP
Name CROFT, SHERI
Address 328 PARK COURT
City-State-Zip: WINTER GARDEN FL 64787

Title S
Name SMARGON, DONNA
Address P O BOX 954145
City-State-Zip: LAKE MARY FL 32795

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

Title C
Name AGGARWAL, ANIL
Address 8641 WHISPERING WILLOW COURT
City-State-Zip: ORLANDO FL 32835

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

Title TREASURER
Name WALK, MITCHELL DR.
Address 33140 LITTLE HAMPTON COURT
City-State-Zip: SORRENTO FL 32776

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

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: LYNN WARNER

PRESIDENT

03/11/2013

Electronic Signature of Signing Officer/Director Detail

Date