

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737336

**Entity Name:** CONGREGATION SHOMREI TORAH OF TALLAHASSEE, INCORPORATED

**FILED**  
**Feb 23, 2023**  
**Secretary of State**  
**4729962746CC**

**Current Principal Place of Business:**

4858 KERRY FOREST PKWY.  
TALLAHASSEE, FL 32309

**Current Mailing Address:**

4858 KERRY FOREST PKWY.  
TALLAHASSEE, FL 32309 US

**FEI Number: 59-1712600**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

KIMELMAN, SAM TREASUR  
4858 KERRY FOREST PKWY.  
TALLAHASSEE, FL 32309 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            SECRETARY  
Name            KINGSBURY, DWIGHT  
Address        1506 NUGENT DRIVE  
City-State-Zip: TALLAHAASSEE FL 32301

Title            PRESIDENT  
Name            SIMON, ELLIE  
Address        121 N. MONROE STREET  
                  UNIT 5003  
City-State-Zip: TALLAHASSEE FL 32301

Title            TREASURER  
Name            KIMELMAN, SAM  
Address        831 WASHINGTON STREET  
City-State-Zip: TALLAHASSEE FL 32303

Title            VPD  
Name            BROWNSTEIN, FRED  
Address        3354 BARROW HILL TRAIL  
City-State-Zip: TALLAHASSEE FL 32313

Title            VPD  
Name            VOGEL, JUSTIN  
Address        4452 ARGYLE LANE  
City-State-Zip: TALLAHASSEE FL 32309

Title            VPD  
Name            ANNIS, MELANIE  
Address        8051 TENNYSON DRIVE  
City-State-Zip: TALLAHASSEE FL 32309

Title            VPD  
Name            COHEN, ROBERT  
Address        1301 LAWNSDALE ROAD  
City-State-Zip: TALLAHASSEE FL 32317

Title            VPD  
Name            THOMPSON, ADINA  
Address        218 W. 1ST AVENUE  
City-State-Zip: TALLAHASSEE FL 32303

*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: SAM N KIMELMAN**

**TREASURER**

**02/23/2023**

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

\_\_\_\_\_  
Date