

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 755531

**Entity Name:** TAMPA-ORLANDO-PINELLAS JEWISH FOUNDATION, INC.

**Current Principal Place of Business:**

13009 COMMUNITY CAMPUS DR  
TAMPA, FL 33625

**Current Mailing Address:**

13009 COMMUNITY CAMPUS DR  
TAMPA, FL 33625 US

**FEI Number: 59-2053655**

**Certificate of Status Desired: No**

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

KALISH, WILLIAM  
401 E. JACKSON STREET  
SUITE 3100  
TAMPA, FL 33601-5228 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 TD, TREASURER  
Name POLEJES, CRAIG  
Address 2110 FORREST ROAD  
City-State-Zip: WINTER PARK FL 32789-6025

Title D  
Name WEISS, ELLEN  
Address 13009 COMMUNITY CAMPUS DR  
City-State-Zip: TAMPA FL 33625

Title V  
Name GEBaide, RACHEL  
Address 215 N. EOLA DRIVE  
City-State-Zip: ORLANDO FL 32801

Title S  
Name KALISH, WILLIAM  
Address 401 E JACKSON STREET, #3100  
City-State-Zip: TAMPA FL 33602

Title P  
Name HERMAN, JEFF  
Address 13009 COMMUNITY CAMPUS DRIVE  
City-State-Zip: TAMPA FL 33625

Title VP  
Name KOKOL, ROBERT  
Address 611 W. BAY STREET  
#2A  
City-State-Zip: TAMPA FL 33606

*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: ELLEN WEISS**

**EXECUTIVE DIRECTOR**

**02/08/2019**

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

\_\_\_\_\_  
Date