

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769404

FILED
Jan 30, 2021
Secretary of State
7090545210CC

Entity Name: KISSIMMEE JEWISH COMMUNITY, INC.

Current Principal Place of Business:

3501 OAKPOINTE BLVD.
KISSIMMEE, FL 34746

Current Mailing Address:

CONGREGATION SHALOM ALEICHEM
P.O. BOX 581367
KISSIMMEE, FL 34758 US

FEI Number: 59-2418727

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WILLNER, WILLIAM
855 GLENDORA ROAD
POINCIANA, FL 34759 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: WILLIAM WILLNER

01/30/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title FIRST VICE PRESIDENT, VP
Name GOODMAN, DOUGLAS
Address 501 GLADE COURT
City-State-Zip: KISSIMMEE FL 34758

Title TREASURER
Name WILLNER, WILLIAM
Address 855 GLENDORA ROAD
City-State-Zip: KISSIMMEE FL 34759

Title SECOND VICE PRESIDENT
Name SIMONSON, PETER
Address 801 NORTH LAVON AVENUE
City-State-Zip: KISSIMMEE FL 34741

Title PRESIDENT
Name GLASER, MARILYN
Address 660 TAPATIO LANE
City-State-Zip: POINCIANA FL 34759

Title RECORDING SECRETARY
Name USLAN, MARILYN
Address 328 NEW RIVER DRIVE
City-State-Zip: POINCIANA FL 34759

Title DIRECTOR
Name SHAPIRO, LAURENCE
Address CONGREGATION SHALOM ALEICHEM
P.O. BOX 581367
City-State-Zip: KISSIMMEE FL 34758

Title DIRECTOR
Name SCHOENEWALDT, ARTHUR
Address CONGREGATION SHALOM ALEICHEM
P.O. BOX 581367
City-State-Zip: KISSIMMEE FL 34758

Title DIRECTOR
Name GUTWORTH, FRANK
Address P.O. BOX 581367.
City-State-Zip: KISSIMMEE FL 34758

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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: WILLIAM WILLNER

01/30/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name RANONIS, SHARON
Address 702 TORREY PINES WAY
City-State-Zip: POINCIANA FL 34759