

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000008028

**Entity Name:** HOLOCAUST EDUCATION RESOURCE COUNCIL, INC.

**Current Principal Place of Business:**

2167 DELTA WAY  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

PO BOX 16282  
TALLAHASSEE, FL 32308

**FEI Number: 26-3126484**

**Certificate of Status Desired: No**

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

GOLDSTEIN, BARBARA  
2167 DELTA WAY  
TALLAHASSEE, FL 32303 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: BARBARA GOLDSTEIN**

**02/13/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER, DIRECTOR  
Name           KIRK, DAVID  
Address        9128 COPPERFAIR LANE  
City-State-Zip: TALLAHASSEE FL 32317

Title           DIRECTOR  
Name           DAVEY, LINDA  
Address        3022 WHITE IBIS WAY  
City-State-Zip: TALLAHASSEE FL 32309

Title           DIRECTOR  
Name           WYGODSKI, AVI  
Address        1019 ALAMEDA DR.  
City-State-Zip: TALLAHASSEE FL 32317

Title           SECRETARY, DIRECTOR  
Name           BILLINGS, MARTHA  
Address        1576 CRESTVIEW AVENUE  
City-State-Zip: TALLAHASSEE FL 32303

Title           DIRECTOR, VP  
Name           DAVIA, KRAMER  
Address        3601 UNCLE GLOVER ROAD  
City-State-Zip: TALLAHASSEE FL 32312

Title           EXEC. DIR.  
Name           GOLDSTEIN, BARBARA  
Address        2167 DELTA WAY  
City-State-Zip: TALLAHASSEE FL 32303

Title           DIRECTOR, PRESIDENT  
Name           FERNANDEZ, SEGUNDO  
Address        2060 DELTA WAY  
City-State-Zip: TALLAHASSEE FL 32303

Title           DIRECTOR  
Name           MCLANE, PRESTON  
Address        2073 SANDCASTLE DR.  
City-State-Zip: TALLAHASSEE FL 32308

**Continues on page 2**

*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: BARBARA GOLDSTEIN**

**EXECUTIVE DIRECTOR**

**02/13/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title BOARD MEMBER  
Name RICCI, ELIZABETH  
Address 2915 KERRY FOREST PARKWAY  
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR  
Name ZIRIN, GARY  
Address 5150 MADDOX RD  
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR  
Name WINN, JUDY  
Address 1424 OX BOTTOM ROAD  
City-State-Zip: TALLAHASSEE FL 32312

Title BOARD MEMBER  
Name JERNIGAN, LAURA  
Address 1416 LEE AVENUE  
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR  
Name COHEN, KAREN ASHER  
Address 1301 LAWNSDALE ROAD  
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR  
Name RICH, KENYA  
Address 8162 PARTERRE COURT  
City-State-Zip: TALLAHASSEE FL 32312