

2019 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

01/09/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name RAINER, FRANK
Address 215 S MONROE STREET
City-State-Zip: TALLAHASSEE FL 32301

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

Title DIRECTOR
Name DAVEY, LINDA
Address 3710 GLIN CIRCLE
City-State-Zip: TALLAHASSEE FL 32309

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

Title DIRECTOR
Name GROSS, KARA
Address 1101 MIMOSA DRIVE
City-State-Zip: TALLAHASSEE FL 32312

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

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

Title EXEC. DIR.
Name GOLDSTEIN, BARBARA
Address 3416 CLIFDEN DRIVE
City-State-Zip: TALLAHASSEE FL 32309

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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: BARBARA GOLDSTEIN

EXECUTIVE DIRECTOR

01/09/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

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

Title BOARD MEMBER
Name JERNIGAN, LAURA
Address 800 OCALA RD.
City-State-Zip: TALLAHASSEE FL 32304

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

Title BOARD MEMBER
Name FANTLE, LAUREN
Address 3639 BARBARY DR.
City-State-Zip: TALLAHASSEE FL 32309