

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21104

**Entity Name:** YOUNG ISRAEL OF TAMPA, INC.**Current Principal Place of Business:**2001 W SWANN AVE  
TAMPA, FL 33606**Current Mailing Address:**2001 W SWANN AVE  
TAMPA, FL 33606 US**FEI Number:** 59-2817195**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAZAR, RIWKIN  
613 S. MELVILLE AVE.  
TAMPA, FL 33606 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	PD
Name	RIWKIN, LAZAR
Address	PO BOX 24821
City-State-Zip:	TAMPA FL 33623

Title	S
Name	RIVKIN, DEVORAH
Address	5205 E. 131 AVE
City-State-Zip:	TAMPA FL 33617

Title	D
Name	DR. ROBERT, METNICK
Address	P.O. BOX 7816
City-State-Zip:	CLEARWATER FL 33758

Title	VPTD
Name	RIVKIN, URIEL M
Address	5205 E. 131 AVE
City-State-Zip:	TAMPA FL 33617

Title	D
Name	KRAKOW, BURTON
Address	3011 BARNHARD DR
City-State-Zip:	TAMPA FL 33613

Title	D
Name	RIVKIN, LEVI I
Address	1407 FOXWOOD DR
City-State-Zip:	LUTZ FL 33549

*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:** LAZAR RIWKIN

PD

06/29/2013

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