

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32543

Entity Name: FLORIDA HOLOCAUST MUSEUM, INC.**Current Principal Place of Business:**55 5TH STREET SOUTH
SAINT PETERSBURG, FL 33701**Current Mailing Address:**55 5TH STREET SOUTH
SAINT PETERSBURG, FL 33701**FEI Number:** 59-2981494**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SIVAK, ELIZABETH G
55 5TH STREET SOUTH
SAINT PETERSBURG, FL 33701 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:** ELIZABETH GELMAN SIVAK

02/15/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	C
Name	BORELL, MARTIN
Address	2913 1/2 WEST HAWTHORNE ROAD
City-State-Zip:	TAMPA FL 33611

Title	V
Name	RENNERT, BRENDON K
Address	10127 PARLEY DRIVE
City-State-Zip:	TAMPA FL 33626

Title	D
Name	LOEBENBERG, WALTER
Address	7834 9TH AVENUE SOUTH
City-State-Zip:	ST. PETERSBURG FL 33701

Title	S
Name	PICCARD, ANN
Address	6200 7TH AVENUE NORTH
City-State-Zip:	ST. PETERSBURG FL 33710

Title	T
Name	SAFT, AMANDA
Address	3007 S. KEATS STREET
City-State-Zip:	TAMPA FL 33629

Title	D
Name	WEISS, IRENE
Address	3591 LANDMARK TR
City-State-Zip:	PALM HARBOR FL 34684

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: MARTIN BORELL**BOARD CHAIR**

02/15/2013

Electronic Signature of Signing Officer/Director Detail

Date