

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000004320

**FILED**  
**Mar 15, 2017**  
**Secretary of State**  
**CC8339695359**

**Entity Name:** BET SHIRA ENDOWMENT FOUNDATION, INC.

**Current Principal Place of Business:**

7500 SW 120 STREET  
PINECREST, FL 33156

**Current Mailing Address:**

7500 SW 120 STREET  
PINECREST, FL 33156

**FEI Number:** 65-0526420

**Certificate of Status Desired:** No

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

LAFONT, AILEEN  
7500 SW 120 STREET  
PINECREST, FL 33156 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:** AILEEN LAFONT

03/15/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title V  
Name GOTTERER, RICHARD  
Address 7350 SW 153 STREET  
City-State-Zip: PALMETTO BAY FL 33157

Title P  
Name ROTH, NEAL  
Address 7229 SW 102 STREET  
City-State-Zip: PINECREST FL 33156

Title T  
Name STONE, ROBERT  
Address 10 EDGEWATER DRIVE, APT. 6-C  
City-State-Zip: CORAL GABLES FL 33133

Title S  
Name SEROTA, GAIL D  
Address 10160 SW 57 COURT  
City-State-Zip: PINECREST FL 33156

*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:** NEAL ROTH

P

03/15/2017

Electronic Signature of Signing Officer/Director Detail

Date