

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 702083
1. Corporation Name

(7)

DAYTONA HEBREW ASSOCIATION



Principal Place of Business

Mailing Address

1400 S. PENINSULA DRIVE
DAYTONA BEACH FL 32118

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DAYTONA BEACH FL 32118

3. Date Incorporated or Qualified
03/02/1961

3a. Date of Last Report
03/17/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-0836550

Applied For
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 City & State

28 City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OSSINSKY, ARTHUR M.
500 N OLEANDER AVENUE
DAYTONA BEACH FL 32118

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PED ☒ DELETE
NAME BERNIS, BONNIE
STREET ADDRESS 3 CROOKED BRIDGE WAY
CITY-ST-ZIP ORMOND FL

1.1 TITLE Co-Presidents ☐ Change ☒ Addition
1.2 NAME Jerome Doliner/Celeste Doliner
1.3 STREET ADDRESS 2920 N. Peninsula Dr.
1.4 CITY-ST-ZIP Daytona Beach, FL

TITLE PD ☒ DELETE
NAME STARR, WILLIAM C.
STREET ADDRESS 717 PELICAN BAY DR.
CITY-ST-ZIP DAYTONA BEACH FL

2.1 TITLE President Elect ☐ Change ☒ Addition
2.2 NAME Irving Cook
2.3 STREET ADDRESS 3 Brookside Court
2.4 CITY-ST-ZIP Ormond Beach, FL

TITLE SD ☒ DELETE
NAME NYE, MARILYN
STREET ADDRESS 904 PRINCETON AVE
CITY-ST-ZIP ORMOND BEACH FL

3.1 TITLE Vice President ☐ Change ☒ Addition
3.2 NAME Harvey Morse
3.3 STREET ADDRESS 42 Marie Drive
3.4 CITY-ST-ZIP Ponce Inlet, FL

TITLE VD ☒ DELETE
NAME TABASKY, ROB
STREET ADDRESS 152 SANDCASTLE DR
CITY-ST-ZIP ORMOND BEACH FL

4.1 TITLE Secretary ☐ Change ☒ Addition
4.2 NAME Helen Riger
4.3 STREET ADDRESS 89 Fairway Drive
4.4 CITY-ST-ZIP Ormond Beach, FL

TITLE T/D ☐ DELETE
NAME KAHN, SYLVIA
STREET ADDRESS 124 LONGSPUR
CITY-ST-ZIP DAYTONA BCH FL 32119

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME 100001862741
5.3 STREET ADDRESS -06/15/96--01001--011
5.4 CITY-ST-ZIP ***61.25

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sylvia Kahn SYLVIA KAHN Treas May 31, 1996

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