

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702276

FILED
Jan 17, 2004
Secretary of State**Entity Name:** JEWISH COMMUNITY CENTER OF PINELLAS COUNTY, INC.**Current Principal Place of Business:**1212 66TH STREET NORTH
ST PETERSBURG, FL 337106226 US**New Principal Place of Business:****Current Mailing Address:**1212 66TH ST NORTH
ST PETERSBURG, FL 337106226 US**New Mailing Address:****FEI Number:** 59-1575476**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KANNER, MENI
5010 PARK BLVD.
PENELLAS PARK, FL 34665 US**Name and Address of New Registered Agent:**KANNER, MENI
5010 PARK BLVD.
PINELLAS PARK, FL 34665 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:

01/17/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: HERSHKOWITZ, HAL E
Address: 1140 THIRD AVENUE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 337152229

Title: SD () Delete
Name: SEDER, JOYCE
Address: 7925 BAYOU CLUB BLVD
City-St-Zip: SEMINOLE, FL 32772

Title: PD () Delete
Name: LIEBERMAN, HARRIETT
Address: 2775 KIPPS COLONY DR 107
City-St-Zip: SAINT PETERSBURG, FL 33707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HAL E. HERSHKOWITZ

TD

01/17/2004

Electronic Signature of Signing Officer or Director

Date