

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702276

FILED  
Feb 11, 2008  
Secretary of State

**Entity Name:** JEWISH COMMUNITY CENTER OF PINELLAS COUNTY, INC.

**Current Principal Place of Business:**

5023 CENTRAL AVE  
ST PETERSBURG, FL 33710

**New Principal Place of Business:**

**Current Mailing Address:**

5023 CENTRAL AVE  
ST PETERSBURG, FL 33710

**New Mailing Address:**

**FEI Number:** 59-1575476

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KANNER, MENI  
7217 17TH COURT NORTHEAST  
SAINT PETERSBURG, FL 33702 US

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

FRANKEL, RON  
7217 17TH COURT NORTHEAST  
SAINT PETERSBURG, FL 33702 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: RON FRANKEL

02/11/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: WEISS, DAVID  
Address: 7991 9TH AVE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: SD ( ) Delete  
Name: LISS, MADELYN  
Address: 10823 INDIAN HILLS COURT #30  
City-St-Zip: SEMINOLE, FL 32772

Title: PD ( ) Delete  
Name: KAMINSKY, JAY  
Address: 12443 92ND TERRACE NORTH  
City-St-Zip: SEMINOLE, FL

Title: VPD ( ) Delete  
Name: FRANKEL, RON  
Address: 7217 17TH COURT NORTHEAST  
City-St-Zip: SAINT PETERSBURG, FL 33702

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: SD (X) Change ( ) Addition  
Name: KELLY, DEBORAH  
Address: 9812 51ST AVENUE NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33708

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 exemption stated in Chapter 119, 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: JAY KAMINSKY

PD

02/11/2008

Electronic Signature of Signing Officer or Director

Date