

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703373

FILED
Jan 31, 2008
Secretary of State

Entity Name: THE PORT CHARLOTTE JEWISH COMMUNITY GROUP, INCORPORATED

Current Principal Place of Business:

23190 UTICA AVE
PORT CHARLOTTE, FL 339494675

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 494675
PORT CHARLOTTE, FL 339494675

New Mailing Address:

FEI Number: 51-0198480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVIN, ALLEN J.
3440 CONWAY BLVD., SUITE 1 A
#6
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TODD, KATZ
Address: 1000 HARBOR GREEN RD
City-St-Zip: PUNTA GORDA, FL 33983

Title: T () Delete
Name: DWORET, WILLIAM DR
Address: 3817 BERMUDA COURT
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD () Delete
Name: RICHARDSON, JULIE
Address: 24153 HARBORVIEW RD
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: VP () Delete
Name: ALPERN, ADA
Address: 4486 NORTSHORE DR
City-St-Zip: CHARLOTTE HARBOR, FL 33980

Title: VP (X) Delete
Name: GOLOMB, LEE
Address: 3115 GUADALUPE DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: GOLOMB, LEE
Address: 3115 GUADALUPE DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

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: WILLIAM DWORET

TREA

01/31/2008

Electronic Signature of Signing Officer or Director

Date