

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705177

FILED  
Apr 07, 2009  
Secretary of State

**Entity Name:** TEMPLE BETH-EL OF ST PETERSBURG, FLORIDA, INCORPORATED

**Current Principal Place of Business:**

400 PASADENA AVENUE S  
ST. PETERSBURG, FL 33707

**New Principal Place of Business:**

**Current Mailing Address:**

400 PASADENA AVENUE S  
ST. PETERSBURG, FL 33707

**New Mailing Address:**

**FEI Number:** 59-0711184

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOLDMAN, STEPHEN H  
400 PASADENA AVE SO  
SAINT PETERSBURG, FL 33707 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: TD ( ) Delete  
Name: MILLER, STEPHEN  
Address: 8573 W GULF BLVD  
City-St-Zip: TREASURE ISLAND, FL 33706

Title: PD ( ) Delete  
Name: MILLER, HOWARD  
Address: 111 ESTADO WAY NE  
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: VD ( ) Delete  
Name: DAVIDSON, RUTH  
Address: 3384 35TH AVE N  
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: PD (X) Change ( ) Addition  
Name: HERSHKOWITZ, HAL E  
Address: 1140 THIRD AVE S  
City-St-Zip: TIERRA VERDE, FL 33715

Title: VD (X) Change ( ) Addition  
Name: MILLER, HOWARD  
Address: 111 ESTADO WAY NE  
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: VD (X) Change ( ) Addition  
Name: DAVIS, GERALD  
Address: 13255 GULF LANE  
City-St-Zip: MADEIRA BEACH, FL 33708

Title: TD ( ) Change (X) Addition  
Name: ROSENBLUTH, JON  
Address: 11269 HARBORSIDE DRIVE  
City-St-Zip: LARGO, FL

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: HAL E. HERSHKOWITZ

PD

04/07/2009

Electronic Signature of Signing Officer or Director

Date