

# 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 712225

1. Entity Name  
KINNERET, INC.



Principal Place of Business  
515 S DELANEY AVE  
ORLANDO, FL 32801

Mailing Address  
515 S DELANEY AVE  
ORLANDO, FL 32801

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03072007 Chg-NP CR2E037 (12/06)

4. FEI Number  
59-6194199

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JS MANAGEMENT  
515 S. DELANEY  
ORLANDO, FL 32801

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

200095814248  
04/04/07--01048--003 \*\*\$1.25

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete  
NAME HALIKMAN, FARLEN  
STREET ADDRESS 1201 S ORANGE AVE, STE 400  
CITY-ST-ZIP WINTER PARK, FL 32789

TITLE D ☐ Change ☒ Addition  
NAME Valerie Denner  
STREET ADDRESS 594 Caledonia Dr  
CITY-ST-ZIP Sanford, FL 32771

TITLE V ☐ Delete  
NAME POLEJES, ALISON  
STREET ADDRESS 2110 FORREST RD  
CITY-ST-ZIP WINTER PARK, FL 32789

TITLE D ☐ Change ☒ Addition  
NAME Carol Feuerman  
STREET ADDRESS 100 Sweetwater Creek Ct  
CITY-ST-ZIP Longwood, FL 32779

TITLE V ☐ Delete  
NAME LEVIN, LAURIE  
STREET ADDRESS 200 S ORANGE AVE, SUITE 2300  
CITY-ST-ZIP ORLANDO, FL 32801

TITLE D ☐ Change ☒ Addition  
NAME Barbara Friedman  
STREET ADDRESS 1557 Eagles Nest Circle  
CITY-ST-ZIP Winter Springs, FL 32708

TITLE SEC ☐ Delete  
NAME MANDELKERN, PAUL  
STREET ADDRESS 653 SELKIRK DRIVE  
CITY-ST-ZIP WINTER PARK, FL 32792

TITLE D ☐ Change ☒ Addition  
NAME Robert Hara  
STREET ADDRESS 118 N Wymore Rd.  
CITY-ST-ZIP Winter Park, FL 32789

TITLE T ☐ Delete  
NAME GINSBERG, JEFFREY  
STREET ADDRESS 12725 PINEY WOODS WAY  
CITY-ST-ZIP CLERMONT, FL 34711

TITLE D ☐ Change ☒ Addition  
NAME Rita Jacobson  
STREET ADDRESS 400 E Colonial Dr Apt 303  
CITY-ST-ZIP Orlando, FL 32803

TITLE V ☐ Delete  
NAME PEARLMAN, RHONDA  
STREET ADDRESS 3900 NEPTUNE AVE  
CITY-ST-ZIP ORLANDO, FL 32804

TITLE D ☐ Change ☒ Addition  
NAME Joseph Meier  
STREET ADDRESS 275 E. Central Parkway #327  
CITY-ST-ZIP Altamonte Springs, FL 32701

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/07 407-740-5400

Date

Daytime Phone #

FILED  
07 MAR 23 PM 12:38

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

