

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723822

FILED  
Apr 18, 2009  
Secretary of State

Entity Name: BETH SHALOM CONGREGATION, NC.

**Current Principal Place of Business:**

4072 SUNBEAM ROAD  
JACKSONVILLE, FL 322578813

**New Principal Place of Business:**

**Current Mailing Address:**

4072 SUNBEAM ROAD  
JACKSONVILLE, FL 322578813

**New Mailing Address:**

FEI Number: 59-1404058      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ZISSER, BARRY L ESQUIR  
1 INDEPENDENT DR  
STE 3306  
JACKSONVILLE, FL 32202 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: D ( ) Delete  
Name: SUSSMAN, CHARLES R  
Address: 9572 WATERFORD ROAD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: VPD ( ) Delete  
Name: MALLOW, ED  
Address: 11643 MAGNOLIA ESTATES RD  
City-St-Zip: JACKSONVILLE, FL 32223

Title: DS ( ) Delete  
Name: SCHARF, BRAM  
Address: 10220 TREVOR CREEK DR EAST  
City-St-Zip: JACKSONVILLE, FL 32257

Title: D ( ) Delete  
Name: SCHARF, MICHAEL  
Address: 6636 EPPING FOREST WAY NORTH  
City-St-Zip: JACKSONVILLE, FL 32217

Title: VD ( ) Delete  
Name: CANTOR, ANDREW  
Address: 4455 SEABREEZE DR  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DP ( ) Delete  
Name: WOLPIN, CAROLE  
Address: 6711 LINFORD LN  
City-St-Zip: JACKSONVILLE, FL 32217

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

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

Title: PD (X) Change ( ) Addition  
Name: MALLOW, ED  
Address: 11643 MAGNOLIA ESTATES RD  
City-St-Zip: JACKSONVILLE, FL 32223

Title: DS (X) Change ( ) Addition  
Name: POPIOL, SUSAN  
Address: 2162 KNOTTINGHAM TRACE LANE  
City-St-Zip: JACKSONVILLE, FL 32246

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

Title: VD (X) Change ( ) Addition  
Name: KAPLAN, JERY  
Address: 9285 ROSEWATER LANE  
City-St-Zip: JACKSONVILLE BEACH, FL 32256

Title: D (X) Change ( ) Addition  
Name: WOLPIN, CAROLE  
Address: 6711 LINFORD LN  
City-St-Zip: JACKSONVILLE, FL 32217

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: CHARLES R SUSSMAN

D

04/18/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date