

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726089

FILED
Jan 29, 2007
Secretary of State

Entity Name: CONGREGATION RODEPH SHOLOM, INC.

Current Principal Place of Business:

2713 BAYSHORE BLVD
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

2713 BAYSHORE BLVD
TAMPA, FL 33629

New Mailing Address:

FEI Number: 59-0872678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOBIN, LEE
943 HARBOUR BAY DRIVE
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

MARILYN, WITTNER
13617 LYTTON WAY
TAMPA, FL 33624 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: MARILYN WITTNER

01/29/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TOBIN, LEE
Address: 943 HARBOUR BAY DR
City-St-Zip: TAMPA, FL 33602

Title: TD () Delete
Name: LASHER, STUART
Address: 4931 NEW PROVIDENCE
City-St-Zip: TAMPA, FL 33629

Title: VPD () Delete
Name: WULIGER, JAN
Address: 1108 SHIPWATCH CIRCLE
City-St-Zip: TAMPA, FL 33602

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WITTNER, MARILYN
Address: 13617 LYTTON WAY
City-St-Zip: TAMPA, FL 33624

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

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

Title: DIR () Change (X) Addition
Name: SIMON, CATHY
Address: 5912 N BRANCH AVE
City-St-Zip: TAMPA, FL 33604

I hereby certify that the information supplied with this filing does not qualify for the 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: CATHY SIMON

DIR

01/29/2007

Electronic Signature of Signing Officer or Director

Date