

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733179

FILED
Apr 30, 2008
Secretary of State

Entity Name: THE ORLANDO CONGREGATION OHEV SHALOM

Current Principal Place of Business:

5015 GODDARD AVE
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

5015 GODDARD AVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 59-0874048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WOLGEL, PHILIP D
5015 GODDARD AVE
ORLANDO, FL 32804 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: PRES () Delete
Name: NEWMAN, STEVEN
Address: 651 LONGMEADOW CIRCLE
City-St-Zip: LONGWOOD, FL 32779

Title: EVP () Delete
Name: STERN, SARA
Address: 512 DOMMERICH DR.
City-St-Zip: MAITLAND, FL 32751

Title: VP () Delete
Name: COHEN, ESTHER
Address: 3627 SUPREME CT
City-St-Zip: APOPKA, FL 32703

Title: TREA () Delete
Name: BLOOM, JOEL
Address: 984 BRIGHTWATER CIRCLE
City-St-Zip: MAITLAND, FL 32751

Title: VP () Delete
Name: WHITE, SHARON
Address: 1570 EAGLE NEST CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: SEC () Delete
Name: REICHEL, NANCY
Address: 907 OAK LEAF COURT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: STERN, SARA N
Address: 512 DOMMERICH DR.
City-St-Zip: MAITLAND, FL 32751

Title: EVP (X) Change () Addition
Name: HELLER, RICHARD A
Address: 993 KERSFIELD CIRCLE
City-St-Zip: HEATHROW, FL 32746

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

Title: TREA (X) Change () Addition
Name: COHEN, RICHARD
Address: 3627 SUPREME CT
City-St-Zip: APOPKA, FL 32703

Title: VP (X) Change () Addition
Name: WHITE, SHARON
Address: 2550 VENETIAN WAY
City-St-Zip: WINTER PARK, FL 32789

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: PHILIP D. WOLGEL

EXEC

04/30/2008

Electronic Signature of Signing Officer or Director

Date