

FILE NOW: FILING FEE IS \$61.25

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Apr 15 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **734412** (0)

1. Corporation Name

CENTRAL FLORIDA CHEVRA KADESHA, INC.



Principal Place of Business	Mailing Address
250 PALM PARK CIRC. SUITE #106 LONGWOOD FL 32779 US	250 PALM PARK CIRC. SUITE #106 LONGWOOD FL 32779-6081 US

2. Principal Place of Business	2a. Mailing Address
21 923-14 LEXINGTON PKWY	26 923-14 LEXINGTON PKWY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 14	27 14
City & State	City & State
23 APOPKA, FL.	28 APOPKA, FL.
Zip	Zip
24 32712	29 32712
Country	Country
25 ORANGE	30 ORANGE

3. Date Incorporated or Qualified 11/24/1975	3a. Date of Last Report 03/08/1996
4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SELTZER, ROBERT 1144 WOODLAND TERR. TRL. ALTAMONTE SPRINGS FL 32714		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SELTZER, ROBERT	1.2 NAME	
STREET ADDRESS	1144 WOODLAND TERR. TRL.	1.3 STREET ADDRESS	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32714	1.4 CITY-ST-ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TITEN, EDWARD	2.2 NAME	
STREET ADDRESS	535 PARK N. CT.	2.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32789	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LISETTE, HALPERIN	3.2 NAME	
STREET ADDRESS	1911 MOCHICAN TRL.	3.3 STREET ADDRESS	
CITY-ST-ZIP	MAITLAND FL	3.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DORFMAN, ISADORE	4.2 NAME	
STREET ADDRESS	250 PALM PARK DR. #166	4.3 STREET ADDRESS	TD DORFMAN, ISADORE
CITY-ST-ZIP	LONGWOOD FL	4.4 CITY-ST-ZIP	923-14 LEXINGTON PKWY.
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)