

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735920

FILED
Apr 30, 2008
Secretary of State

Entity Name: CONGREGATION BETH SHALOM

Current Principal Place of Business:

1325 S. BELCHER RD.
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

1325 S. BELCHER RD.
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 59-1290855 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOMSTEIN, ALAN
1015 VICTORIA DRIVE
DUNEDIN, FL 34698 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: P () Delete
Name: SHANE, MICHAEL
Address: 104 ANNWOOD RD
City-St-Zip: PALM HARBOR, FL 34685

Title: P () Delete
Name: FIEL, ROBYN
Address: 265 126TH AVE
City-St-Zip: TREASURE ISLAND, FL 33706

Title: T () Delete
Name: SHARF, MATTHEW
Address: 2966 EAGLE ESTATES CIRCLE W.
City-St-Zip: CLEARWATER, FL 33761

Title: VPOP () Delete
Name: NORDLINGER, ART
Address: 1480 GULF BLVD #906
City-St-Zip: CLEARWATER, FL 33767

Title: VPF () Delete
Name: SHIFTAN, GARY
Address: 3874 TIMBER RIDGE CT
City-St-Zip: PALM HARBOR, FL 34685

Title: S () Delete
Name: KRAUS, RANDI
Address: 2436 GLENANN DR
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: HEYMAN, SUSAN
Address: 2061 BROOKSIDE DR.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: T (X) Change () Addition
Name: SCHLOSS, ART
Address: 4132 MORENO DR.
City-St-Zip: PALM HARBOR, FL 34685

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

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

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: MICHAEL SHANE

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date