

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741237

FILED
Feb 01, 2008
Secretary of State

Entity Name: CONGREGATION OF BETH AM, INCORPORATED

Current Principal Place of Business:

3899 SAND LAKE RD.
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 915756
LONGWOOD, FL 327915756 US

New Mailing Address:

FEI Number: 59-2570603

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEISS, JOANNE
3899 SAND LAKE ROAD
LONGWOOD, FL 32779 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: DAVIDS, MARK
Address: 429 WILLOWBROOK LANE
City-St-Zip: LONGWOOD, FL 32779

Title: T () Delete
Name: RUBEN, ANTHONY
Address: 504 SPRINGCREEK DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: VP () Delete
Name: WILLIAMS, DAN
Address: 110 SHADOW LAKE DR
City-St-Zip: LONGWOOD, FL 32779

Title: SD () Delete
Name: BLATTNER, CRAIG
Address: 508 WOODVIEW DRIVE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILLIAMS, DAN
Address: 110 SHADOW LAKE DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: T (X) Change () Addition
Name: WILSON, LOUIS
Address: 521 KESSAMO WAY
City-St-Zip: LAKE MARY, FL 32746

Title: VP (X) Change () Addition
Name: RIOLA, JAMES
Address: 4571 OLD CARRIAGE TRAIL
City-St-Zip: OVIEDO, FL 32765

Title: SD (X) Change () Addition
Name: MORGAN, MARSHAL
Address: 295 SMOKERISE BLVD
City-St-Zip: LONGWOOD, FL 32779

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: DANIEL WILLIAMS

PRES

02/01/2008

Electronic Signature of Signing Officer or Director

_____ Date