

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90293 018 ****61.25

20042433



01062005 Chg-NP CR2E037 (10/03)

DOCUMENT # 748124 1. Entity Name THE PINELLAS COUNTY JEWISH DAY SCHOOL, INC.					
Principal Place of Business 1775 S HIGHLAND AVE CLEARWATER, FL 33756 US			Mailing Address 1775 S HIGHLAND AVE CLEARWATER, FL 33756 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1920812	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
ROHRMANN, PAULINE 1775 SO HIGHLAND AVE CLEARWATER, FL 33756			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Pauline Rohrmann</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			DATE 4-19-05 <small>(NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT SEMBER, DIANE 7306 SAWGRASS POINT DRIVE PINELLAS PARK, FL 33782 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT KOBERNICK, DEBBIE. 2227 MERMAID POINT N.E. ST. PETERSBURG, FL 33703 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PPT STEIN, STEPHANIE 7893 BAYOU CLUB SEMINOLE, FL 33777 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ELECT SELTZER, MICHAEL 2235 BREVARD ROAD N.E. ST. PETERSBURG, FL 33704 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BERNER, DEBBIE 175 ROSERY ROAD CLEARWATER, FL 33756 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. MARKETING SIEGEL, SONATHAN 5840 TANGLEWOOD DRIVE N.E. ST. PETERSBURG, FL 33703 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KOBERANICK, DEBBIE 1725 LONGBOW LANE CLEARWATER, FL 33764 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER PRIGTO, JOSE 1765 LONGBOW LANE CLEARWATER, FL 33764 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPF SAGER, DIANA 1761 LONG BOW LANE CLEARWATER, FL 33764 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. FUNDRAISING SADOWSKY, DAVID. 2552 KNOTTY PINE WAY CLEARWATER, FL 33761 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY SCHLIFSTEIN, MICHELE 678 SNUG ISLAND CLEARWATER, FL 33767 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, without other like empowered.					
SIGNATURE: <i>Debbie Kobernick</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 4-17-05 Daytime Phone # 588-0100		

ATTACHMENT

BLOCK 11 (CONTINUED)

TITLE: PAST PRESIDENT

NAME: SEMBLER, DIANE

STREET

ADDRESS: 7306 SAWGRASS POINT DRIVE

CITY-ST-ZIP: PINELLAS PARK, FL 33782

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