

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90926 013 ****61.25

0040396

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

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**ROHRMANN, PAULINE
1775 SO HIGHLAND AVE
CLEARWATER FL 33756**

7. Name and Address of New Registered Agent

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

Pauline Rohrmann

PAULINE ROHRMANN

4/8/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PPT** ☒ Delete
NAME **SADOWSKY, DAVID**
STREET ADDRESS **2552 KNOTTY PINE WAY**
CITY-ST-ZIP **CLEARWATER FL 33761**

TITLE **PT** ☐ Delete
NAME **STEIN, STEPHANIE**
STREET ADDRESS **7893 BAYOU CLUB**
CITY-ST-ZIP **SEMINOLE FL 33777**

TITLE **T** ☒ Delete
NAME **VENER, DAVID DR**
STREET ADDRESS **8488 35TH AVENUE**
CITY-ST-ZIP **SAINT PETERSBURG FL 33710**

TITLE **ST** ☒ Delete
NAME **SOKOLOV, MARK**
STREET ADDRESS **10745 BARBES COURT**
CITY-ST-ZIP **LARGO FL 33777**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PT** ☐ Change ☒ Addition
NAME **SEMBLER, DINNE**
STREET ADDRESS **7306 SAWGRASS POINT DRIVE**
CITY-ST-ZIP **PINELLAS PARK FL 33782**

TITLE **PPT** ☒ Change ☐ Addition
NAME **STEIN, STEPHANIE**
STREET ADDRESS **7893 BAYOU CLUB**
CITY-ST-ZIP **SEMINOLE FL 33777**

TITLE **T** ☐ Change ☒ Addition
NAME **BEAVER, DEBBIE**
STREET ADDRESS **175 ROSEARY ROAD**
CITY-ST-ZIP **BELLERAI FL 33756**

TITLE **ST** ☐ Change ☒ Addition
NAME **KOBERNICK, DEBBIE**
STREET ADDRESS **2327 MERMAID PT. N.E.**
CITY-ST-ZIP **ST. PETERSBURG FL 33703**

TITLE ☐ Change ☒ Addition
NAME **VICE PRESIDENT FUNDRAISING**
STREET ADDRESS **PRIETO, JOSE**
CITY-ST-ZIP **1725 LONGBOW LANE
CLEARWATER FL 33764**

TITLE ☐ Change ☒ Addition
NAME **VICE PRESIDENT FUNDRAISING**
STREET ADDRESS **SAGER, DIANA**
CITY-ST-ZIP **1761 LONG BOW LANE
CLEARWATER FL 33764**

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, with all other like empowered.

SIGNATURE: *Stephanie Stein* **Stephanie Stein** **Apr 10, 2003 (12)588-900**

CR2E037 (10/02)