

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755531

FILED
Feb 24, 2005
Secretary of State

Entity Name: TAMPA-ORLANDO-PINELLAS JEWISH FOUNDATION, INC.

Current Principal Place of Business:

13009 COMMUNITY CAMPUS DR
TAMPA, FL 33625 US

New Principal Place of Business:

Current Mailing Address:

13009 COMMUNITY CAMPUS DR
TAMPA, FL 33625 US

New Mailing Address:

FEI Number: 59-2053655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRODIN, JAMES
13009 COMMUNITY CAMPUS DR
TAMPA, FL 33625 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: VD () Delete
Name: FOX, GREGORY
Address: 28050 US 49 N #100
City-St-Zip: CLEARWATER, FL 33761

Title: VD () Delete
Name: WEINER, BENJAMIN
Address: 338 W MORSE BLVD SUITE 200
City-St-Zip: WINTER PARK, FL 32789

Title: SD () Delete
Name: ORLOFF, BRUCE
Address: 2640 ST ANDREWS DRIVE
City-St-Zip: CLEARWATER, FL 33761

Title: SD () Delete
Name: KOKOL, BOB
Address: 401 E JACKSON STREET 19TH FLOOR
City-St-Zip: TAMPA, FL 33602

Title: PD () Delete
Name: SHEAR, CASEY
Address: 906 ANCHOR RD
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TD (X) Change () Addition
Name: KOKOL, BOB
Address: 880 CARILLION PKWY
City-St-Zip: ST PETERSBURG, FL 33733

Title: PD (X) Change () Addition
Name: JAMES, GRODIN
Address: 111 NORTH ORANGE AVE
City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES GRODIN

PD

02/24/2005

Electronic Signature of Signing Officer or Director

Date