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May 09 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 766672 (0)  
1. Corporation Name  
CONGREGATION B'NAI EMMUNAH, INC.



Principal Place of Business: 38577 US 19 N, PALM HARBOR FL 34684 US  
Mailing Address: PO BOX 2028, TARPON SPRINGS FL 34688-2028 US

3. Date incorporated or Qualified: 01/24/1983  
3a. Date of Last Report: 03/04/1996

2. Principal Place of Business: 21 3374 KEYSTONE RD., 22 Suite, Apt. #, etc., 23 TARPON SPRINGS, FL, 24 Zip 34689, 25 Country U.S.

2a. Mailing Address: 26, 27 Suite, Apt. #, etc., 28 City & State, 29 Zip, 30 Country

4. FEI Number: 59-2354125  
Applied For: Not Applicable  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent  
LEVIN, BERNICE  
39650 US 19 N, #584  
TARPON SPRINGS FL 34689

10. Name and Address of New Registered Agent  
81 Name: SCALA, SINCLAIRE  
82 Street Address (P.O. Box Number is Not Acceptable): 2107 ALEXIS CT  
83  
84 City: TARPON SPRINGS, FL 85 Zip Code: 34689

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.050, Florida Statutes.  
SIGNATURE: SCALA, SINCLAIRE *Sinclair Scale* April 23, 1997  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD SCALA, SINCLAIRE 2107 ALEXIS CT TARPON SPRINGS FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE P/D KATZ, MARTIN 5934 WILLOW CREEK CT NEW PORT RICHEY, FL 34655
TITLE	V GRUBER, LIESA 125 KELLEYS TRAIL OLDSUAR FL	<input type="checkbox"/> DELETE	2.1 TITLE D KOENFELD, LEONARD 1119 MAINSAIL DR TARPON SPRINGS, FL 34689
TITLE	D PINCUS, NEWTON 1801-14C EAST LAKE ROAD PALM HARBOR FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE S PRESS, JAN 1718 VIRGINIA AVE PALM HARBOR, FL 34683
TITLE	D MCKAY, SALLY 589 SEVERS LANDING PALM HARBOR FL	<input type="checkbox"/> DELETE	4.1 TITLE D PETRIE, DAVIDA 139 FOREST LANE DRIVE SAFETY HARBOR, FL 34694
TITLE	D LEVIN, JULES 39650 US 19 N #584 TARPON SPRINGS FL 34689	<input checked="" type="checkbox"/> DELETE	5.1 TITLE D PAULL, NICK 2716 WOODVIEW CT. CLEARWATER, FL 34621
TITLE	TD WALTERS, VICTOR 1984 JEFFORDS ST. CLEARWATER FL	<input checked="" type="checkbox"/> DELETE	6.1 TITLE TD SCALA, SINCLAIRE 2107 ALEXIS CT TARPON SPRINGS, FL 34689

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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sinclair Scale* April 23, 1997 (813)927-5720

CR2E037 (9/96)