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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 769478

1. Corporation Name

(9)

THE NATIONAL COUNCIL OF JEWISH WOMEN, TAMPA SECTION, INC.

ION, IN	IC.			
Principal Plac	e of Business	Mailing Address		
4209 EUCLID AVE. Tampa FL 33629-8423 US		4209 EUCLID AVE. Tampa Fl 33629-8423 US		Date Incorporated or Qualified 3a. Date of Last Report
				07/20/1983 01/24/1996
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number Applied For 59-6192644 Not Applied by
Suite, Apt.	# 6/6	26		Not Applicable \$8.75 Additional
22	. ", 010.	27		5. Certificate of Status Desired Fee Required
City & Stat	te	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23 Zip	Country	28	Country	Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,
24	25		30	Florida Statutes Yes No
	9. Name and Address of Curre	int Registered Agent		10. Name and Address of New Registered Agent
			81 Name	
BERNSTEIN, FRANCES R 4209 EUCLID AVE			82 Stree	et Address (P.O. Box Number is Not Acceptable)
	FL 33629		83	
			84 City	FL 85 Zip Code
11 Pureuant	to the provisions of Sections 617 05	in2 and 617 1508. Florida Statutes	the above-name	ed corporation submits this statement for the purpose of changing its registered
office or i	registered agent, or both, in the Statem familiar with, and accept the obli	te of Florida. Such change was au	thorized by the co	corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	arritarian with are accept the con-	gasons of possesing (1,0000, 1,01	da Olalolos	
	Signature, typed or printed name of registered a			alure required when reinstating) DATE
12. TITLE	OFFICERS A	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	ROSENBERG, ROBIN		1.2 NAME	0.55.40
STREET ADDRESS	1001 W. CORAL		1.3 STREET ADDRESS	SS
CITY-ST-ZIP	TAMPA FL		1.4 CITY - ST - ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	Change Addition
NAME	ROSENBLATT, DORIS		2.2 NAME	
STREET ADDRESS	654 RIVIERA DR.		2.3 STREET ADDRESS	ss
CITY-ST-ZIP	TAMPA FL		2 4 CITY-ST-ZIP	
TITLE	D 70F	☐ DELETE	3.1 TITLE	Change Addition
NAME	GOULD, ZOE		3.2 NAME	
STREET ADDRESS	5010 BAYSHORE BLVD. #5		3.3 STREET ADDRESS	SS
CITY-ST-ZIP	TAMPA FL D	DELETE	3.4. CITY-ST-ZIP	Change Addition
TITLE	COHEN, BETTY		4.1 IFILE 4. 2 NAME	Change — Action
NAME STREET ADDRESS	2623 N. DUNDEE		4.3 STREET ADDRESS	es l
CITY-ST-ZIP	TAMPA FL		4.4 CITY-ST-ZIP	99
TITLE	T	DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	BERNSTEIN, FRANCES R		52 NAME	
STREET ADDRESS	4209 EUCLID AVE		53 STREET ADDRESS	ss
CITY-ST-ZIP	TAMPA FL		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	ss

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:

TREASURER 1/3/97 8

R2F037 (9/96)

FILED

Jan 17 1997 8:00am

Secretary of State