
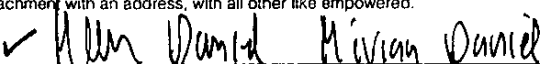


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2008 8:00 am
Secretary of State

02-06-2008 90033 037 ****61.25

DOCUMENT # F94000002871 1. Entity Name FRIENDS OF BETH DANIEL SYNAGOGUE AND COMMUNITY CENTER, INC.					
Principal Place of Business 601 LONGBOAT CLUB ROAD 1101S LONGBOAT KEY, FL 34228 US			Mailing Address 4108 LELAND ST CHEVY CHASE, MD 20815 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01112008 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 13-3695770	
Zip		Country		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	
DANIEL, GERARD 1301 N TAMIAMI TRAIL, UNIT 614 SARASOTA, FL 34236				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		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	DP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DANIEL, GERARD		NAME		
STREET ADDRESS	601 LONGBOAT CLUB ROAD		STREET ADDRESS		
CITY - ST - ZIP	LONGBOAT KEY, FL		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FORCHHEIMER, RUDOLPH		NAME		
STREET ADDRESS	1 OAKSTWAIN ROAD		STREET ADDRESS		
CITY - ST - ZIP	SCARSDALE, NY		CITY - ST - ZIP		
TITLE	DVST	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DANIEL, MIRIAM		NAME	DT	
STREET ADDRESS	4108 LELAND ST		STREET ADDRESS		
CITY - ST - ZIP	CHEVY CHASE, MD 20815		CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	DVP	
STREET ADDRESS			STREET ADDRESS	RALPH DANIEL	
CITY - ST - ZIP			CITY - ST - ZIP	2944 ARRIBA WAY	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	LAURENCE WOLFF	
STREET ADDRESS			STREET ADDRESS	4108 LELAND ST	
CITY - ST - ZIP			CITY - ST - ZIP	CHEVY CHASE, MD 20815	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 			2/2/08		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		
			<small>Daytime Phone #</small>		

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