

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006652

FILED
Jun 22, 2009
Secretary of State

Entity Name: CONGREGATION BETH ELISHAMA DAVID INC.

Current Principal Place of Business:

316 FERRARA COURT
KISSIMMEE, FL 34758

New Principal Place of Business:

Current Mailing Address:

316 FERRARA COURT
KISSIMMEE, FL 34758

New Mailing Address:

FEI Number: 11-2452007 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KATAN, DAVID
316 FERRARA COURT
KISSIMMEE, FL 34758 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: PCD () Delete
Name: KATAN, DAVID
Address: 316 FERRARA COURT
City-St-Zip: KISSIMMEE, FL

Title: V () Delete
Name: BRIDGEWATER, CARLTON A
Address: 2208 SYLVAN COURT
City-St-Zip: KISSIMMEE, FL

Title: S () Delete
Name: BORONELL, DEBORAH
Address: 261 COMPETITION DRIVE
City-St-Zip: KISSIMMEE, FL

Title: T () Delete
Name: BRIDGEWATER, JACKIE A
Address: 2208 SYLVAN COURT
City-St-Zip: KISSIMMEE, FL

Title: VD () Delete
Name: KATAN, SHIRLEY A
Address: 316 FERRARA COURT
City-St-Zip: KISSIMMEE, FL

Title: D () Delete
Name: JONES, MARIE
Address: 261 COMPETITION DRIVE
City-St-Zip: KISSIMMEE, FL

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DAVID KATAN

PCD

06/22/2009

Electronic Signature of Signing Officer or Director

_____ Date