

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000341

FILED  
Apr 04, 2005  
Secretary of State

Entity Name: NEW JERUSALEM MESSIANIC SYNAGOGUE, INC.

**Current Principal Place of Business:**

C/O MICHAEL STEPAKOFF  
2672 BAYSHORE BLVD.  
DUNEDIN, FL 34698

**New Principal Place of Business:**

C/O MICHAEL STEPAKOFF  
2686 BAYSHORE BLVD.  
DUNEDIN, FL 34698

**Current Mailing Address:**

C/O MICHAEL STEPAKOFF  
8370 W HILLSBOROUGH AV STE 208  
TAMPA, FL 33615

**New Mailing Address:**

C/O MICHAEL STEPAKOFF  
8370 W HILLSBOROUGH AVE STE 208  
TAMPA, FL 33615

FEI Number: 14-1868001

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STEPAKOFF, MICHAEL G  
8370 W HILLSBOROUGH AVE STE 208  
TAMPA, FL 33615 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: PD ( ) Delete  
Name: STEPAKOFF, MICHAEL  
Address: 8370 W HILLSBOROUGH AVE STE 208  
City-St-Zip: TAMPA, FL 33615

Title: D ( ) Delete  
Name: MINSKY, STUART  
Address: 10901 COVEY CT  
City-St-Zip: TAMPA, FL 33625

Title: D ( ) Delete  
Name: ADLER, MARTIN  
Address: 1550 LANEY DR  
City-St-Zip: PALM HARBOR, FL 34683

Title: D ( ) Delete  
Name: FRADY,, CHUCK  
Address: 5113 ARBOR POINT CIR.  
City-St-Zip: TAMPA,, FL 33617

Title: VPD ( ) Delete  
Name: STEPAKOFF, TARA  
Address: 8370 W. HILLSBOROUGH AVE., STE. 208  
City-St-Zip: TAMPA, FL 33615

**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 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: MICHAEL STEPAKOFF

P

04/04/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date