

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Mar 22, 2009  
Secretary of State

DOCUMENT# N03000007560

Entity Name: CONGREGATION SINAI, INC.

## Current Principal Place of Business:

3551 HANCOCK ROAD  
CLERMONT, FL 34711

## New Principal Place of Business:

303A NORTH US HWY. 27  
MINNEOLA, FL 34715 US

## Current Mailing Address:

4327 S. HWY 27  
BOX 123  
CLERMONT, FL 34711 53

## New Mailing Address:

303A NORTH US HWY. 27  
MINNEOLA, FL 34711 US

FEI Number: 58-2671389

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEVY, GWEN  
3606 EVERS HOLT ST  
CLERMONT, FL 34711 US

## Name and Address of New Registered Agent:

MILLNER, DAWN  
11334 LAKE KATHERINE CIRCLE  
CLERMONT, FL 34711 US

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: DAWN MILLNER

03/22/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: COHEN, MATTHEW  
Address: 1010 HIDDEN BLUFF  
City-St-Zip: CLERMONT, FL 34711

Title: S ( ) Delete  
Name: WHITMAN, SHEILA  
Address: 17920 EARTH ST LN  
City-St-Zip: GROVELAND, FL 34736

Title: V ( ) Delete  
Name: SLOTNICK, GEORGE  
Address: 2165 ADDISON AVE  
City-St-Zip: CLERMONT, FL 34771

Title: D ( ) Delete  
Name: FRIEDMAN, WALTER  
Address: 5209 LINKS LN  
City-St-Zip: LEESBURG, FL 34748

Title: T ( ) Delete  
Name: NORDEN, MARSHA  
Address: 21348 ROYAL TROON DRIVE  
City-St-Zip: LEESBURG, FL 34748

Title: D ( ) Delete  
Name: SILPE, STEVEN  
Address: 2109 GRAFTON AVENUE  
City-St-Zip: CLERMONT, FL 34711

## 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:

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: GEORGE SLOTNICK

VP

03/22/2009

Electronic Signature of Signing Officer or Director

Date