

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 03, 2009
Secretary of State

DOCUMENT# N08000005598

Entity Name: HUMANISTIC JEWISH HAVURAH OF SOUTHWEST FLORIDA, INC.**Current Principal Place of Business:**755 PROVINCETOWN DR
NAPLES, FL 34104**New Principal Place of Business:****Current Mailing Address:**755 PROVINCETOWN DR
NAPLES, FL 34104**New Mailing Address:****FEI Number:** 26-3242735**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BOURNSTINE, CHARLES
755 PROVINCETOWN DR
NAPLES, FL 34104 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:** DC () Delete
Name: CREED, PAULA R
Address: 3330 CROSSINGS CT #605
City-St-Zip: BONITA SPRINGS, FL 34134**Title:** DVCT () Delete
Name: LITZ, MARILYN S
Address: 2625 ORCHID BAY DR #104
City-St-Zip: NAPLES, FL 34109**Title:** DS (X) Delete
Name: RIVEL, CECILE
Address: 1955 WEXFORD CT
City-St-Zip: NAPLES, FL 34109**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** DVCT (X) Change () Addition
Name: BOURNSTINE, CHARLES S
Address: 755 PROVINCETOWN DRIVE
City-St-Zip: NAPLES, FL 34104**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: CHARLES S. BOURNSTINE

DVCT

04/03/2009

Electronic Signature of Signing Officer or Director

Date