

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13681

FILED
Mar 13, 2008
Secretary of State

Entity Name: THE LEE COUNTY JEWISH FEDERATION, INC.

Current Principal Place of Business:

6237 PRESIDENTIAL CT.
E
FT. MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

6237 PRESIDENTIAL CT.
E
FT. MYERS, FL 33919 US

New Mailing Address:

FEI Number: 59-2668992 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KARINA CIRESI JEWISH FEDERATION
6237 PRESIDENTIAL CT.
SUITE E
FT MYERS, FL 339190568 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: PPD () Delete
Name: LEWIN, JO ANN
Address: 1496 WHISKEY CREEK DRIVE
City-St-Zip: FORT MYERS, FL 339192239 US

Title: VP () Delete
Name: WEISINGER, CHARLES
Address: 11600 COURT OF PALMS #702
City-St-Zip: FORT MYERS, FL 33908 US

Title: SD () Delete
Name: BOBMAN, JULIE
Address: 813 CAPE VIEW DRIVE
City-St-Zip: FORT MYERS, FL 33919 US

Title: TD () Delete
Name: WEINER, THEODORE
Address: 5464 WHISPERING WILLOW WAY
City-St-Zip: FORT MYERS, FL 33908 US

Title: P () Delete
Name: FRIED, HERBERT
Address: 3535 HERITAGE LANE
City-St-Zip: FT MYERS, FL 33908 US

Title: VP () Delete
Name: WEINER, KENNETH
Address: 1642 MEDICAL LANE #B
City-St-Zip: FORT MYERS, FL 33907

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:

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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: HERBERT FRIED

P

03/13/2008

Electronic Signature of Signing Officer or Director

Date