

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2002 8:00 am
Secretary of State

04-21-2002 90876 013 ****61.25

DOCUMENT # N19909

1. Entity Name

KENT JEWISH COMMUNITY CENTER PRESCHOOL, INC.

Principal Place of Business

Mailing Address

**1955 VIRGINIA STREET
 CLEARWATER FL 34623**

**1955 VIRGINIA STREET
 CLEARWATER FL 34623**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

1950 VIRGINIA AVENUE

Suite, Apt. #, etc.

1950 VIRGINIA AVENUE

City & State

CLEARWATER FL

City & State

CLEARWATER FL

Zip

Country

USA

Zip

Country

USA

4. FEI Number

59-2790461

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NEWMARK, STANLEY
 1280 HEATHER RIDGE BLVD
 DUNEDIN FL 34698**

Name

NEWMARK, STANLEY

Street Address (P.O. Box Number is Not Acceptable)

3151 OYSTER BAYOU WAY

City

CLEARWATER

FL

Zip Code

33759

8. 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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete
 NAME **SOLOMON, MINDY**
 STREET ADDRESS **1871 SALEM COURT**
 CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **KENT, REVA**
 STREET ADDRESS **3136 MASTERS DRIVE**
 CITY-ST-ZIP **CLEARWATER FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **RUTENBERG, CHARLES**
 STREET ADDRESS **3140 MASTERS DRIVE**
 CITY-ST-ZIP **CLEARWATER FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **PD** ☐ Delete
 NAME **NEWMARK, STANLEY**
 STREET ADDRESS **1280 HEATHER RIDGE BLVD**
 CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE **P** ☒ Change ☐ Addition
 NAME **NEWMARK, STANLEY**
 STREET ADDRESS **3151 OYSTER BAYOU WAY**
 CITY-ST-ZIP **CLEARWATER, FL 33759**

TITLE **D** ☐ Delete
 NAME **RUTENBERG, CHARLES**
 STREET ADDRESS **3283 HYDE PARK BLVD**
 CITY-ST-ZIP **CLEARWATER FL 33761**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **T** ☐ Delete
 NAME **NEWMARK, ENID**
 STREET ADDRESS **1280 HEATHER RIDGE BLVD**
 CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE **T** ☒ Change ☐ Addition
 NAME **NEWMARK, ENID**
 STREET ADDRESS **3151 OYSTER BAYOU WAY**
 CITY-ST-ZIP **CLEARWATER, FL 33759**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)