## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21104

FILED Jul 09, 2007 Secretary of State

Entity Name: YOUNG ISRAEL OF TAMPA, INC.

Current Principal Place of Business:		New Principal Place of Business:	
	ST TACON ST. EL 33629 US		
urrent N	failing Address:	New Mailing Address:	
	MORIAL HWY.		
A AMPA, F			
	r: 59-2817195 FEI Number Applied For ( ) Face with s. 607.193(2)(b), F.S., the corporation did not re	El Number Not Applicable ( ) Certificate of Status Desire	ed ( )
	d Address of Current Registered Agent:	Name and Address of New Registered Agent:	
113 MEN	I, MICHAEL B MORIAL HWY FL 33634 US		
	e named entity submits this statement for the purp se of Florida.	ose of changing its registered office or registered agent,	or both,
IGNATU			
	Electronic Signature of Registered Agent	Date	
FFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTO
tle:	PD ( ) Delete	Title: PD (X) Change ( ) Addition	
ıme: ldress: ty-St-Zip:	RIVKIN, ELIEZER 5205 E. 131 AVE. TAMPA, FL 33617	Name: RIWKIN, LAZAR Address: PO BOX 24821 City-St-Zip: TAMPA, FL 33623	
dress: :y-St-Zip: le: ime: dress:	5205 E. 131 AVE.	Address: PO BOX 24821	
dress: y-St-Zip: le: me: dress: y-St-Zip: le: me: dress:	5205 E. 131 AVE. TAMPA, FL 33617  VPTD ( ) Delete RIVKIN, URIEL M 5205 E. 131 AVE	Address: PO BOX 24821 City-St-Zip: TAMPA, FL 33623  Title: ( ) Change ( ) Addition Name: Address:	
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ldress:	5205 E. 131 AVE. TAMPA, FL 33617  VPTD () Delete RIVKIN, URIEL M 5205 E. 131 AVE TAMPA, FL 33617  D () Delete RIVKIN, DVORA 5205 E. 131 AVE TAMPA, FL 33617  S () Delete RICHMAN, MICHAEL B 5113 MEMORIAL HIGHWAY	Address: PO BOX 24821 City-St-Zip: TAMPA, FL 33623  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: LAZAR RIWKIN PD 07/09/2007