

FILE NOW: FILING FEE IS \$61.25

FILED

Jun 03 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N25252 (0)  
1. Corporation Name  
CONGREGATION B'NAI ISRAEL OF ST. PETERSBURG, FLO  
RIDA, INC.



Principal Place of Business Mailing Address  
301 59TH ST. N. ST. PETERSBURG FL 33710  
301 59TH ST. N. ST. PETERSBURG FL 33710-7806

3. Date Incorporated or Qualified 03/08/1988  
3a. Date of Last Report 05/01/1996  
4. FEI Number 59-0747302 Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent  
LUDIN, ERIC  
PIPER & LUDIN, P.A.  
5720 CENTRAL AVE.  
ST. PETERSBURG FL 33707

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE PD NAME WEISBERG, ROBERT STREET ADDRESS 332 7TH AVENUE N. CITY-ST-ZIP TIERRA VERDE FL 33715	<input checked="" type="checkbox"/> DELETE
TITLE VD NAME PEARLSTEIN, REVA STREET ADDRESS 7919 PAR AVENUE N. CITY-ST-ZIP ST. PETERSBURG FL 33710	<input type="checkbox"/> DELETE
TITLE VD NAME HOPES, SCOTT STREET ADDRESS 2052 CAROLINA AVE. N.E. CITY-ST-ZIP ST. PETERSBURG FL 33703	<input checked="" type="checkbox"/> DELETE
TITLE VD NAME SMALBACH, NEAL STREET ADDRESS 301 BATH CLUB N. CITY-ST-ZIP REDINGTON BEACH FL 33708	<input type="checkbox"/> DELETE
TITLE SD NAME BLANCHARD, DEBORAH STREET ADDRESS 14881 PINECREST DR. CITY-ST-ZIP SEMINOLE FL 34644	<input checked="" type="checkbox"/> DELETE
TITLE TD NAME MIZRAHI, RALPH STREET ADDRESS 7011 MANGO AVE. S. CITY-ST-ZIP ST. PETERSBURG FL 33707	<input checked="" type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE VD 1.2 NAME Judith Gordon 1.3 STREET ADDRESS 9029 Baywood Park Dr. N. 1.4 CITY-ST-ZIP Seminole, Fl. 33777	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE PD 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE VD 3.2 NAME Sandy Slomka 3.3 STREET ADDRESS 7993 - 10th Ave. S. 3.4 CITY-ST-ZIP St. Petersburg, Fl. 33707	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE SD 5.2 NAME Morris Bornstein 5.3 STREET ADDRESS 13356 - 88th Ave. N. 5.4 CITY-ST-ZIP Seminole, Fl. 33776	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.1 TITLE TD 6.2 NAME Michael Benstock 6.3 STREET ADDRESS 12383 Windtree Blvd. 6.4 CITY-ST-ZIP Seminole, Fl. 33772	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE \_\_\_\_\_ DATE 5-7-97

CR2E037 (9/96)