

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90353 007 ****61.25

DOCUMENT # N25252

1. Entity Name

**CONGREGATION B'NAI ISRAEL OF ST. PETERSBURG, FLO
 RIDA, INC.**

Principal Place of Business

Mailing Address

**300-58TH ST NORTH
 ST. PETERSBURG FL 33710**

**300-58TH ST NORTH
 ST. PETERSBURG FL 33710**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0747302

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LUDIN, ERIC
 PIPER & LUDIN, P.A.
 5720 CENTRAL AVE.
 ST. PETERSBURG FL 33707**

Name

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

City

FL

Zip Code

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 Delete
 NAME **PD REDISCH, PHILIP**
 STREET ADDRESS **5009 61ST LANE NORTH**
 CITY-ST-ZIP **KENNETH CITY FL 33709**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **3VPD WARREN, GAIL**
 STREET ADDRESS **1295 81ST STREET SOUTH**
 CITY-ST-ZIP **SAINT PETERSBURG FL 33707**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **2VPD SCHWARTZ, SANDY**
 STREET ADDRESS **1681 LONGBOW LANE**
 CITY-ST-ZIP **CLEARWATER FL 34624**

TITLE Change Addition
 NAME **1VPD Schwartz, Susan**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **TD BERG, NAOMI**
 STREET ADDRESS **1919 OXFORD STREET N**
 CITY-ST-ZIP **SAINT PETERSBURG FL 33710**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **1VPD BORNSTEIN, MORRIS**
 STREET ADDRESS **13356 88TH AVE NORTH**
 CITY-ST-ZIP **SEMINOLE FL 33776**

TITLE Change Addition
 NAME **2VPD Wallace, Michael**
 STREET ADDRESS **6697 - 11th Avenue No.**
 CITY-ST-ZIP **St. Petersburg, Fl. 33710**

TITLE Delete
 NAME **SD SHER, KAREN**
 STREET ADDRESS **8651 MAIDSTONE CT**
 CITY-ST-ZIP **LARGO FL 33777**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

[Handwritten Signature] **REQUIRED**

4/22/02

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CR2E037 (9/01)