## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #**1. Corporation Name

(2)

CONGREGATION BETH SHOLOM OF LAKE COUNTY, FLORIDA

, INC.				
Principal Place of Business		Mailing Address		LIBALIYAN ANA YIBAN YANDA YANDA KUM ANAYA DIBAN ANAKA ANAYA DIBAN BADIN KADIN
127 WEST MAIN STREET		127 WEST MAIN STREET		3. Date Incorporated or Qualified
C/O GETZEL MULARSKY		C/O GETZEL MULARSKY		1
LEESBURG FL 34748		LEESBURG FL 34748		09/14/1988 4. FEI Number Applied For
				59-2142219 Not Applicable
2. Principal Pl	lace of Business	2a. Malting Address	· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired S8.75 Additional
21		26		Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing\$5.00 May Be
City & State		City & State		Trust Fund Contribution Added to Fees
23		28		7. Is this nonprofit corporation a homeowners association?
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25		90	Personal Property Tax due June 30. 🔀 Yes 🔲 No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
81 Name AL 5HANKY				
MULARSKY, DEBRA			82 Street A	ddress (P.O. Box Number is Not Acceptable)
211 SOUTH NURSERY ROAD			83 97	30 FAIRWAY CIRCLE
LEESBURG FL 32748				
Ì			84 City	85 Zip Code
LEES borg FL 34788				
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 AL SHAWK Signature, typed or printed name of registered Agent and title if applicable (NOTE: Registered Agent)				1/2///
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	<b>S</b> DELETE	1.1 TITLE	D AT SHANKY B Change Addition D
NAME	SCHIFF, SAMUEL		1.2 NAME	PRESIDENT D
STREET ADDRESS	2317 BONNIE VIEW CT		1.3 STREET ADDRESS	9720 FAIRWAY CIRCLE
CITY-ST-ZIP	LEESBURG FL		1.4 CITY - ST - ZIP	LEES bURG, FL. 34788
TITLE	TD	DELETE		D VICE PRESIDENT & Change Addition
NAME	MULARSKY, DEBBIE		2.2 NAME	MICHAGL SCHAFFER. 33205 COVENTRY DRIVE
STREET ADDRESS	211 S. NURSERY ROAD		2.3 STREET ADDRESS	
CITY-ST-ZIP	LEESBURG FL	M DELETE	2.4 CITY-ST-ZIP	TREASURER D'Change Addition
TITLE	VOLUM MAANICORD	CE DECEIL	3.1 TITLE	n
NAME STREET ADDRESS	KOHN, MANFORD 248 WESTWOOD DRIVE		3.2 NAME 3.3 STREET ADDRESS	ED MARCUS
CITY-ST-ZIP	LEESBURG FL		3.4. City-ST-ZIP	1502 NEW Abboy AVE LEES GURG, FL 34788
TITLE	D D	DELETE	4.1 TITLE	SECRE-LARLY Change Addition
NAME	MARCUS, ANNE		4. 2 NAME	HELEN PARKIN
STREET ADDRESS	1502 NEW ABBEY AVENUE		4.3 STREET ADDRESS	115 AHA WAY
CITY-ST-ZIP	LEESBURG FL		4.4 CITY - ST - ZIP	LEGSBURG FL 34788
TITLE	D	DELETE	5.1 TITLE	BOARD Howberk Change Addition
NAME	SCHAFFER, MICHEAL	,	5.2 NAME	MANFORD Koho
STREET ADDRESS	33205 COVENTRY DRIVE		5.3 STREET ADDRESS	248 WESTWOOD DR
CITY-ST-ZIP	LEESBURG FL		5.4 CITY-ST-ZIP	LEETBURG EL 34748
TITLE	SD	DELETE	6.1 TITLE	BOARD HERECE Change & Addition
NAME	MORRIS, NANCY		6.2 NAME	DENNIS LAVER
STREET ADDRESS	6744 LAKEVIEW DR.		6.3 STREET ADDRESS	1112 W. MAIN ST,
CITY-SY-ZIP	YALAHA FL		6.4 CITY-ST-ZIP	LEESGURG, FL 34748

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 annual report or suppliermental 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: AL 5HANKY

1/12/98 352-323-5779

**FILED** 

Feb 17 1998 8:00am

Secretary of State