

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28363

FILED  
Jan 12, 2008  
Secretary of State

**Entity Name:** CONGREGATION BETH SHOLOM OF LAKE COUNTY, FLORIDA, INC.

**Current Principal Place of Business:**

315 N. 13TH ST  
LEESBURG, FL 34748

**New Principal Place of Business:**

**Current Mailing Address:**

315 N. 13TH ST  
LEESBURG, FL 34748

**New Mailing Address:**

FEI Number: 59-2142219      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GLICK, MICHAEL  
4323 SERENE CIRCLE  
FRUITLAND PARK, FL 34731      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GLICK, MICHAEL  
Address: 4323 SERENE CIRCLE  
City-St-Zip: FRUITLAND PARK, FL 34731

Title: SD ( ) Delete  
Name: GRAE, ARTHUR  
Address: 27542 DISCOVER CT  
City-St-Zip: LEESBURG, FL 34748

Title: TD ( ) Delete  
Name: SINGER, PAMELA J  
Address: 430 BENTWOOD DR.  
City-St-Zip: LEESBURG, FL 34748

Title: VD ( ) Delete  
Name: LEVINE, MICHAEL  
Address: 33835 OVERTON DRIVE  
City-St-Zip: LEESBURG, FL 34788

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: GRAE, ARTHUR  
Address: 27542 DISCOVER CT  
City-St-Zip: LEESBURG, FL 34748

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: LEVINE, MICHAEL  
Address: 33835 OVERTON DRIVE  
City-St-Zip: LEESBURG, FL 34788

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: MICHAEL GLICK

PD

01/12/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date