

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36000

FILED  
Apr 18, 2010  
Secretary of State

**Entity Name:** CONGREGATION M'ATEH CHAIM, INCORPORATED

**Current Principal Place of Business:**

451 RIVIERA DR  
C/O UNITED CHURCH OF CHRIST  
PALM BAY, FL 32905

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 060847  
PALM BAY, FL 32906

**New Mailing Address:**

FEI Number: 59-2970132

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BURBERRY, LEE  
769 JOHN CARROLL LANE  
WEST MELBOURNE, FL 32904 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: D  
Name: PORTNOWITZ, BARRY  
Address: 170 DRISKELL ST N.E.  
City-St-Zip: PALM BAY, FL 32907

Title: T  
Name: BURBERRY, LEE  
Address: 769 JOHN CARROLL LN  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D  
Name: BERNIER, DEBBIE  
Address: 284 HUMKEY ST. NE  
City-St-Zip: PALM BAY, FL 32907

Title: VP  
Name: ORLINSKY, ADELE  
Address: 841 SPANISH WELLS DR  
City-St-Zip: MELBOURNE, FL 3294

Title: D  
Name: SCHIFF, MARILYN  
Address: 1372 ASHFORD ST.  
City-St-Zip: PALM BAY, FL 32907

Title: P  
Name: SIMON, HELENE  
Address: 481 TOPEKA RD SW  
City-St-Zip: PALM BAY, FL 32908

I hereby 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 all other like empowered.

SIGNATURE: LEE BURBERRY

T

04/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date