

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37133

FILED  
Mar 27, 2009  
Secretary of State

**Entity Name:** SYNAGOGUE OF CARRIAGE CLUB SOUTH, INC.

**Current Principal Place of Business:**

300 - 41ST STREET  
SUITE 218  
MIAMI BEACH, FL 33140 US

**New Principal Place of Business:**

**Current Mailing Address:**

300 - 41ST STREET  
SUITE 218  
MIAMI BEACH, FL 33140 US

**New Mailing Address:**

**FEI Number:** 65-0263868

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MERRITT, ROGER J  
300 - 41ST STREET  
SUITE 218  
MIAMI BEACH, FL 33140 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: DP ( ) Delete  
Name: LESSMAN, SALEK  
Address: 5001 COLLINS AVENUE  
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: DV ( ) Delete  
Name: ROZ, HERSCHEL  
Address: 5001 COLLINS AVENUE  
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: DST ( ) Delete  
Name: BECK, STANLEY  
Address: 5001 COLLINS AVE.  
City-St-Zip: MIAMI BEACH, FL 33140 US

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

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

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

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

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: SALEK LESSMAN

DP

03/27/2009

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

\_\_\_\_\_  
Date