

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41219

FILED
Apr 07, 2010
Secretary of State

Entity Name: CHABAD LUBAVITCH OF SARASOTA AND MANATEE COUNTIES, INC.

Current Principal Place of Business:

7700 BENEVA RD
SARASOTA, FL 34238 US

New Principal Place of Business:

Current Mailing Address:

7700 BENEVA RD
SARASOTA, FL 34238 US

New Mailing Address:

FEI Number: 65-0234425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRYBAUSKAS, NYJOLA S.
3631 FIFTH AVE. N.
ST. PETERSBURG, FL 33713 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
Name: STEIN, BARRY DR.
Address: 7625 KAPOK DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: D
Name: WEINSTEIN, MORRIS
Address: 3713 TORREY PINES BOULEVARD
City-St-Zip: SARASOTA, FL 34238

Title: D
Name: TUDIN, RONNI
Address: 815 PARADISE WAY
City-St-Zip: SARASOTA, FL 34242

Title: DS
Name: STEINMETZ, CHAIM S
Address: 7700 WILLIAMS AVE.
City-St-Zip: SARASOTA, FL 34231

Title: T
Name: ROSEN, HOWARD
Address: 3940 TORREY PINES BLVD
City-St-Zip: SARASOTA, FL 34238

Title: DS
Name: STEINMETZ, SARA
Address: 7700 WILLIAMS AVE.
City-St-Zip: SARASOTA, FL 34231

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: CHAIM STEINMETZ

DS

04/07/2010

Electronic Signature of Signing Officer or Director

Date