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2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9400002036 1. Entity Name

SYNAGOGUE COUNCIL OF SARASOTA-MANATEE, INC.

FILED Aug 01, 2002 8:00 am Secretary of State 08-01-2002 90164 040 ****61.25

| Principal Pla | ace of Busines | s | Mailing Address | | - | | | | | | | |
|--|---|---|--|--|--|---|--|---|---|--------------------------------------|-------------------------------------|---------------------|
| 567 BAY ISLES ROAD LONGBOAT KEY FL 34228 | | 567 BAY ISLES ROAD LONGBOAT KEY FL 34228 | | | | | | | | | | |
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| 2. Principal Place of Business | | 3. Mailing Address | 3. Mailing Address | | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | DO NOT WRITE IN THIS SPACE | | | | | | |
| City & State | | | City & State | City & State | | | 4. FEI Number Applied For Not Applied For Not Applied For | | | | | 7 |
| Zip | Zip Country Z | | | Zip Country | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required | | | | | |
| | 6. Name | and Address of Current | Registered Agent | | | | 7. Name and Ad | dress of New Re | gistered . | | | 1 |
| . يرجي جنست | | | | | Name | | | | | | | |
| LENK, ELI | LEN . | | | | Street A | ddress (F | P.O. Box Number is | Not Acceptable) | | . | | - |
| 4001 OAH | KLEY GREEN | E | | | | | | | | *** | | - |
| SARASOT | TA FL 34235 | | | | Cit | | | | | T= - | | 4 |
| | | | | | City | | | | FL | Zip Cod | | i |
| 8. The above | e named entity | submits this statement fo | or the purpose of changing | g its register | ed office or | r registere | ed agent, or both, ir | the State of Flori | da. Lam | familiar with, | and accept | 1 |
| ine obliga | ations of registi | ered agent. | | | | | | | | | | |
| SIGNATURE | Ellen | Lenk | | | | | | July | 25 | 200 | 2. | |
| | Signature, typed | or printed name of registered agent | and title if applicable. | (NOTE: Registere | ed Agent signatu | ure required | when reinstating) | | DATE | | | 1 |
| | | | | | | | | | | | | |
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| | | ember 13, 2002, | | Campaign F | | | \$5.00 May Be | Mak | e Check | Payable | to | |
| | | ember 13, 2002, be \$236.25. | | Campaign F nd Contribut | | | \$5.00 May Be Added to Fees | | | Payable | | |
| 10. | | | Trust Fu | nd Contribut | tion. | Ц | Added to Fees | De | partme | nt of State | 9 | |
| | | be \$236.25. | Trust Fu | | tion. | A | Added to Fees | De ES TO OFFICERS | partme | nt of State | l 10 |)2) |
| 10. TITLE NAME | win. will | be \$236.25. | Trust Ful | nd Contribut | E | PP A | Added to Fees ODITIONS/CHANG OME RUSEN | ES TO OFFICERS | partme | nt of State | 9 | (4/02) |
| 10. TITLE NAME STREET ADDRESS | VPD FLORSHEII 44 GREENI | OFFICERS AND DIF OFFICERS AND DIF M, GILBERT FIELD AVENUE | Trust Ful | nd Contribut 11. TITLE NAM STRE | E EET ADDRESS | PD JER 548 | Added to Fees DDITIONS/CHANG OME RUSEN SPINNAKER | ES TO OFFICERS | Partmei | nt of State | l 10 | 337 (4/02) |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPD FLORSHEII 44 GREENI SARASOTA | OFFICERS AND DIF OFFICERS AND DIF M, GILBERT FIELD AVENUE | Trust Ful RECTORS | nd Contribut 11. TITLE NAM STRE | E EET ADDRESS -ST-ZIP | PD JER 548: | Added to Fees ODITIONS/CHANG OME RUSEN | ES TO OFFICERS | Partmei | nt of State | l 10 | I2E037 (4/02) |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | VPD FLORSHEII 44 GREENI SARASOTA D | OFFICERS AND DIF OFFICERS AND DIF M, GILBERT FIELD AVENUE A FL 34231 | Trust Ful | 11. TITLE NAM STRE CITY | E IE EET ADDRESS '-ST-ZIP E | PD JER 548: LONG | Added to Fees DDITIONS/CHANG OME RUSEN SPINNAKER BOAT KEY | ES TO OFFICERS ATHAL LN, FL 343 | Partmei | nt of State | l 10 | CR2E037 (4/02) |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | VPD FLORSHEII 44 GREENI SARASOTA D BEROTH, L | OFFICERS AND DIF OFFICERS AND DIF M, GILBERT FIELD AVENUE LFL 34231 EON | Trust Ful RECTORS | 11. TITLE NAM STRE CITY TITLE NAM | E E EET ADDRESS '-ST-ZIP E | PD 15 R 548 : | Added to Fees DDITTIONS/CHANG OME RUSEN SPINNAKER BOAT KEY | De ES TO OFFICERS ATHAL LN, FL 343 | Partmei | RECTORS IN Change | I 10 Addition | CR2E037 (4/02) |
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attackment with an address, with all other like empowered.

941-383-9126

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