

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 28, 2004 8:00 am
Secretary of State

01-28-2004 90007 001 ****61.25

DOCUMENT # N97000004426

1. Entity Name

CONGREGATION L'DOR VA-DOR, INC.



Principal Place of Business

7436 ROCKBRIDGE CIRCLE
LAKE WORTH FL 33467

Mailing Address

7436 ROCKBRIDGE CIRCLE
LAKE WORTH FL 33467

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0765165

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KAMIN, BEVERLY
7436 ROCKBRIDGE CIRCLE
LAKE WORTH FL 33467

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME KAMIN, BEVERLY ☐ Delete
STREET ADDRESS 7436 ROCKBRIDGE CIRCLE
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE
NAME NATHAN, HAL ☒ Delete
STREET ADDRESS 6270 BARON CREEK CIR.
CITY-ST-ZIP LAKE WORTH FL 33483

TITLE
NAME TENDRICH, GREG ☒ Delete
STREET ADDRESS 4594 PINE TREE DR
CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME FRANE GROSSMAN ☒ Change ☐ Addition
STREET ADDRESS 4822 ESEDRA COURT #306
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE
NAME LEE SHAW ☒ Change ☐ Addition
STREET ADDRESS 251 OAKVIEW DRIVE
CITY-ST-ZIP DELRAY BEACH, FL 33445

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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 attachment with an address with all other like empowered.

SIGNATURE:

Beverly Kamin President/Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/04
Date

561-967-4444
Daytime Phone #