| DOCUMENT# N0000000071 |
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| Entity Name: CHABAD LUBAVITCH OF THE PANHANDLE, TALLAHASSEE, INC. |
| Current Principal Place of Business: |

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

224 CHAPEL DRIVE TALLAHASSEE, FL 32304

Current Mailing Address:

224 CHAPEL DRIVE TALLAHASSEE, FL 32304 US

FEI Number: 65-0970446

Name and Address of Current Registered Agent:

OIRECHMAN, SHNEIOR Z RABBI 232 CHAPLE DR TALLAHASSEE, FL 32304 US Certificate of Status Desired: No

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

Officer/Director Detail :

| Title | PD | Title | TD | |
|-----------------|----------------------------|-----------------|----------------------|--|
| Name | OIRECHMAN, SHNEIOR Z RABBI | Name | OIRECHMAN, CHANA | |
| Address | 2093 GREENWOOD DRIVE | Address | 2093 GREENWOOD DRIVE | |
| City-State-Zip: | TALLAHASSEE FL 32303 | City-State-Zip: | TALLAHASSEE FL 32303 | |
| | | | | |
| | | | | |
| Title | SD | Title | VPD | |
| Title Name | SD BISTON, RABBI J | Title Name | VPD SALVER, ISAAC | |
| | | | | |
| Name | BISTON, RABBI J | Name | SALVER, ISAAC | |

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: SHNEIOR Z OIRECHMAN

PRESIDENT

01/26/2016

Date

Electronic Signature of Signing Officer/Director Detail

FILED Jan 26, 2016 Secretary of State CC5862059178