

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001506

Entity Name: CHABAD OF CHARLOTTE COUNTY, INC.

Current Principal Place of Business:

204 E MCKENZIE ST
UNIT B
PUNTA GORDA, FL 33950

Current Mailing Address:

204 E MCKENZIE ST
UNIT B
PUNTA GORDA, FL 33950 US

FEI Number: 20-2896301

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACOBSON, SIMON RABBI
455 W WILLIAM STREET
PUNTA GORDA, FL 33950 US

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

Officer/Director Detail :

Title PD
Name JACOBSON, SIMON RABBI
Address 455 W WILLIAM STREET
City-State-Zip: PUNTA GORDA FL 33950

Title SVPD
Name JACOBSON, SHEINA
Address 455 W WILLIAM STREET
City-State-Zip: PUNTA GORDA FL 33950

Title D
Name BENDET, MENDEL
Address 204 E MCKENZIE ST
UNIT B
City-State-Zip: PUNTA GORDA FL 33950

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: SIMON JACOBSON

RABBI

08/10/2015

Electronic Signature of Signing Officer/Director Detail

Date