

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006312

Entity Name: CHABAD LUBAVITCH OF NORTH ORLANDO, INC.**Current Principal Place of Business:**1701 MARKHAM WOODS RD.
LONGWOOD, FL 32779**Current Mailing Address:**1701 MARKHAM WOODS RD.
LONGWOOD, FL 32779 US**FEI Number: 27-0595998****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DUBOV, SHOLOM B
642 GREEN MEADOW AVE
MAITLAND, FL 32751 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	DP
Name	MAJESKY, YAAKOV Y
Address	1695 GLEN ETHEL LN
City-State-Zip:	LONGWOOD FL 32779

Title	DVST
Name	MAJESKY, CHANIE
Address	1695 GLEN ETHEL LN
City-State-Zip:	LONGWOOD FL 32779

Title	D
Name	HECHT, YOSEF
Address	3500 SW 34TH AVENUE CIRCLE
City-State-Zip:	OCALA FL 34474

Title	D
Name	LIPSKIER, CHAIM
Address	600 OAK CIR
City-State-Zip:	OVIEDO FL 32765

Title	D
Name	LEIBOWITZ, ED
Address	614 BROOKWOOD LANE
City-State-Zip:	MAITLAND FL 32751

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: YAAKOV MAJESKY**DP****01/20/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date