

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000001468

**Entity Name:** CHABAD LUBAVITCH OF LAKELAND, INC.**Current Principal Place of Business:**2270 GRIFFIN ROAD  
LAKELAND, FL 33810**Current Mailing Address:**2270 GRIFFIN ROAD  
LAKELAND, FL 33810 US**FEI Number:** 45-4233720**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAZAROS, MOSHE  
2270 GRIFFIN ROAD  
LAKELAND, FL 33810 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:** MOSHE LAZAROS

05/01/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, SECRETARY  
Name LAZAROS, MOSHE RABBI  
Address 3775 PRESCOTT LOOP  
City-State-Zip: LAKELAND FL 33810

Title DIRECTOR  
Name DUBROWSKI, YOSSIE RABBI  
Address 4717 GRAINERY AVENUE  
City-State-Zip: TAMPA FL 33624

Title DIRECTOR  
Name DUBOV, SHOLOM RABBI  
Address 642 GREEN MEADOW AVENUE  
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR, PRESIDENT, CHAIRMAN  
Name WIENER, MICHAEL  
Address 2137 KIRKLAND LAKE DRIVE  
City-State-Zip: AUBURNDALE FL 33823

Title DIRECTOR  
Name PURETZ, JEFFREY M.D.  
Address 6603 STONINGTON DRIVE NORTH  
City-State-Zip: TAMPA FL 33647

Title DIRECTOR  
Name FRIEDMAN, MENACHEM RABBI  
Address 3858 PRESCOTT LOOP  
City-State-Zip: LAKELAND FL 33810

*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:** MOSHE LAZAROS**SECRETARY**

05/01/2018

Electronic Signature of Signing Officer/Director Detail

Date