

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15164

Entity Name: CONGREGATION BETH AM OF TAMPA, INC.**Current Principal Place of Business:**2030 W FLETCHER AVE
TAMPA, FL 33612**Current Mailing Address:**2030 W FLETCHER AVE
TAMPA, FL 33612 US**FEI Number:** 59-2678553**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HUNEYCUTT, NEAL
2030 W FLETCHER AVE
TAMPA, FL 33612 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:** NEAL HUNEYCUTT

01/03/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP OF COMMUNICATIONS
Name FRIEDMAN, CATHY
Address 508 MONTROSE AVE
City-State-Zip: TEMPLE TERRACE FL 33617-3863

Title PRESIDENT
Name BOWEN, DEBORAH
Address 2049 PARK CRESCENT DRIVE
City-State-Zip: LAND O LAKES FL 34639

Title PAST PRESIDENT
Name GAMSON, MICHAEL
Address 12008 TREVINO PL
City-State-Zip: TAMPA FL 33624

Title VP FACILITIES
Name BOWMAN, SHERYL
Address PO BOX 1515
City-State-Zip: LUTZ FL 33548

Title VP MEMBERSHIP
Name CARROLL, ELIZABETH
Address 1884 TALLULAH TERRACE
City-State-Zip: WESLEY CHAPEL FL 33543

Title VP RITUAL & EDUCATION
Name PHILLIPS, SARAH
Address 103 W FLORA STREET
City-State-Zip: TAMPA FL 33604

Title FINANCIAL SECRETARY
Name FRIEDMAN, ROBERT DR.
Address 508 MONTROSE AVE
City-State-Zip: TEMPLE TERRACE FL 33617-3863

Title PRESIDENT ELECT
Name KOHN, JARED
Address 18825 BIRCHWOOD GROVES DR
City-State-Zip: LUTZ FL 33558

Continues on page 2

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: NEAL HUNEYCUTT

TREASURER

01/03/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name HUNEYCUTT, NEAL
Address 443 JOHNSON AVE
 UNIT 503
City-State-Zip: CAPE CANAVERAL FL 32920

Title RABBI
Name ROSENBERG, JASON
Address 4725 WINDFLOWER CIRCLE
City-State-Zip: TAMPA FL 33624