

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25252

**Entity Name:** CONGREGATION B'NAI ISRAEL OF ST. PETERSBURG, FLORIDA, INC.

**FILED**  
**Apr 17, 2023**  
**Secretary of State**  
**5462044987CC**

**Current Principal Place of Business:**

300 58 ST. N.  
ST. PETERSBURG, FL 33710

**Current Mailing Address:**

300 58 ST. N.  
ST. PETERSBURG, FL 33710 US

**FEI Number: 59-0747302**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LUDIN, ERIC  
ENGLANDER & FISCHER  
721 1ST AVENUE, N  
ST. PETERSBURG, FL 33701 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 IMMEDIATE PAST PRESIDENT  
Name BOWSER, DOROTHY  
Address 300 58 ST. N.  
City-State-Zip: ST. PETERSBURG FL 33710

Title PRESIDENT  
Name SHANE, JOEL  
Address 300 58 ST. N.  
City-State-Zip: ST. PETERSBURG FL 33710

Title FIRST VICE PRESIDENT  
Name SHEPPARD, INA  
Address 300 58 ST. N.  
City-State-Zip: ST. PETERSBURG FL 33710

Title SECOND VICE PRESIDENT  
Name RICHMAN, EILEEN  
Address 300 58 ST. N.  
City-State-Zip: ST. PETERSBURG FL 33710

Title THIRD VICE PRESIDENT  
Name STEIN, STEPHANIE  
Address 300 58 ST. N.  
City-State-Zip: ST. PETERSBURG FL 33710

Title TREASURER  
Name REISKIND, MARC  
Address 300 58TH ST. N  
City-State-Zip: ST PETERSBURG FL 33710

Title SECRETARY  
Name WEISBERG, ARI  
Address 300 58 ST. N.  
City-State-Zip: ST. PETERSBURG FL 33710

Title PARLIAMENTARIAN  
Name HERSHKOWITZ, DEAN  
Address 300 58 ST. N.  
City-State-Zip: ST. PETERSBURG FL 33710

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*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: MARC REISKIND**

**EXECUTIVE DIRECTOR**

**04/17/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title RABBI  
Name WEINTRAUB, PHILIP RABBI  
Address 300 58 ST. N  
City-State-Zip: ST. PETERSBURG FL 33710