

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702652

FILED
Jan 10, 2007
Secretary of State

Entity Name: JEWISH COMMUNITY SERVICES OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

735 NE 125TH STREET
NORTH MIAMI, FL 33161 US

New Principal Place of Business:

Current Mailing Address:

735 NE 125TH STREET
NORTH MIAMI, FL 33161 US

New Mailing Address:

FEI Number: 59-0637867 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SALTMAN, DAVID B
735 NE 125TH STREET
NORTH MIAMI, FL 33161 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: WECHSLER, DEBI
Address: 485 LEUCADENDRA DR
City-St-Zip: CORAL GABLES, FL 33156

Title: CH () Delete
Name: MERLIN, ROBERT
Address: 95 MERRICK WAY #420
City-St-Zip: CORAL GABLES, FL 33134

Title: TR () Delete
Name: LEVINE, JEFF
Address: 1627 DIPLCHAT DR
City-St-Zip: MIAMI, FL 33179

Title: VC () Delete
Name: GRETENSTEIN, STEVEN
Address: 436 BARGELLO AVE
City-St-Zip: CORAL GABLES, FL 33146

Title: VC () Delete
Name: SPILL, JOY
Address: 4200 ROYAL PALM AVENUE
City-St-Zip: MIAMI, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CH (X) Change () Addition
Name: GRETENSTEIN, STEVEN
Address: 436 BARGELLO AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: TR (X) Change () Addition
Name: ALTMAN, STUART
Address: 3802 NE 207 STREET, #602
City-St-Zip: AVENTURA, FL 33180

Title: VC (X) Change () Addition
Name: SPILL, JOY
Address: 4200 ROYAL PALM AVENUE
City-St-Zip: MIAMI, FL 33140

Title: VC (X) Change () Addition
Name: ENSLEIN, JENNIFER
Address: 20201 NE 23 COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID B. SALTMAN

PRES

01/10/2007

Electronic Signature of Signing Officer or Director

Date