

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704147

FILED  
Jul 05, 2007  
Secretary of State

**Entity Name:** THE JEWISH FEDERATION OF GREATER ORLANDO, INC.

**Current Principal Place of Business:**

851 N. MAITLAND AVE.  
MAITLAND, FL 327944426 US

**New Principal Place of Business:**

**Current Mailing Address:**

851 N. MAITLAND AVE.  
PO BOX 941508  
MAITLAND, FL 327941508 US

**New Mailing Address:**

**FEI Number:** 59-0946923      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

BODNER, SUSAN  
851 N MAITLAND AVE  
MAITLAND, FL 327514426 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

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: KANE, STEVEN  
Address: 522 WINDING CREEK WAY  
City-St-Zip: LONGWOOD, FL 32779

Title: C ( ) Delete  
Name: APPELBAUM, RICHARD  
Address: 21 MAITLAND GROVES  
City-St-Zip: MAITLAND, FL 32751

Title: S ( ) Delete  
Name: WEINREICH, BARBARA  
Address: 1323 ANCHOR CT  
City-St-Zip: ORLANDO, FL 32804

Title: P ( ) Delete  
Name: BODNER, SUSAN  
Address: 851 N. MAITLAND AVENUE  
City-St-Zip: MAITLAND, FL 32751

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: EDE SLOVIN

MS.

07/05/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date