

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 705135

FILED
Apr 26, 2002 8:00 AM
Secretary of State

Entity Name: JEWISH FAMILY SERVICE INC OF BROWARD COUNTY, FLORIDA

Current Principal Place of Business:

100 S. PINE ISLAND RD.
#130
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

100 S. PINE ISLAND RD.
#130
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: 59-0995106 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SUNDEL, SANDRA S.
100 S. PINE ISLAND RD.
#130
PLANTATION, FL 33324 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: PD () Delete
Name: WELLINS, STEVEN
Address: 101 NW 108 WAY
City-St-Zip: PLANTATION, FL 33324

Title: SD () Delete
Name: ZEDECK, LILA
Address: 6300 SW 130TH AVE
City-St-Zip: FT LAUDERDALE, FL 33330

Title: ED () Delete
Name: SUNDEL, SANDRA S.
Address: 100 S. PINE ISLAND RD, #130
City-St-Zip: PLANTATION, FL 33324

Title: VD () Delete
Name: TELLES, SELMA
Address: 233 JACARANDA DR
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: ROSEN, STEVEN
Address: 10736 NW 21ST STREET
City-St-Zip: CORAL SPRINGS, FL 33071

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 for the exemption stated in Section 119.07(3)(i), 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: SANDRA S. SUNDEL

ED

04/26/2002

Electronic Signature of Signing Officer or Director

_____ Date