

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Murman  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # **714937** (0)

95 MAY -1 AM 8:23

**JEWISH FEDERATION OF GREATER FORT LAUDERDALE, IN C.**

Principal Place of Business: **8358 W OAKLAND PARK BLVD FT LAUDERDALE FL 33351**  
Mailing Address: **8358 W OAKLAND PARK BLVD FT LAUDERDALE FL 33351**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>07/12/1968</b>	3a. Date of Last Report <b>06/09/1994</b>
4. FEI Number <b>59-1227585</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Five Year Campaign Financing Trust Fund Contributions <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.037, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite Apt # etc.	26. Suite Apt # etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent  
**BIERMAN, KENNETH B. WASH, MICHELLE C.  
8358 W OAKLAND PARK BLVD  
FT LAUDERDALE FL 33321**

10. Name and Address of New Registered Agent  
81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City  
85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, as both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and agree to the publication of Section 607.1505, Florida Statutes.

SIGNATURE: *Michelle Wash*  
Signature of Registered Agent (Registered Agent must sign)

SIGNATURE: \_\_\_\_\_  
Signature of Registered Agent (Registered Agent must sign)

12. OFFICERS AND DIRECTORS	
TITLE	<b>TD</b>
NAME	<b>EPSTEIN, STUART</b>
STREET ADDRESS	<b>1700 NW 97 AVE</b>
CITY, ST, ZIP	<b>PLANTATION FL</b>
TITLE	<b>VD</b>
NAME	<b>PRESS, MARTIN</b>
STREET ADDRESS	<b>500 E BROWARD BLVD SUITE 1130</b>
CITY, ST, ZIP	<b>FT LAUDERDALE FL</b>
TITLE	<b>BIERMAN, KENNETH B. WASH, MICHELLE C.</b>
NAME	<b>8358 W OAKLAND PARK BLVD</b>
STREET ADDRESS	<b>FT. LAUDERDALE FL</b>
CITY, ST, ZIP	
TITLE	<b>PD</b>
NAME	<b>LEHRER, PAUL</b>
STREET ADDRESS	<b>4850 W PROSPECT RD.</b>
CITY, ST, ZIP	<b>FT. LAUDERDALE FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 111.02(1)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 on Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Michelle Wash*  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Date: **4/28/95**