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Feb 13 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 723303 (4)

1. Corporation Name  
TAMARAC JEWISH CENTER, INC



Principal Place of Business Mailing Address  
9101 NW 57 STREET TAMARAC FL 33351  
9101 NW 57 STREET TAMARAC FL 33351-4311

3. Date Incorporated or Qualified 05/01/1972  
3a. Date of Last Report 04/30/1996

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-1405955 Applied For Not Applicable  
22 Suite, Apt #, etc. 27 Suite, Apt #, etc. 6. Certificate of Status Desired \$8.75 Additional Fee Required  
23 City & State 28 City & State 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
24 Zip Country 29 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent PINCHEVSKY, DAVID 5701 W. PINE ISLAND ROAD TAMARAC FL 33321  
10. Name and Address of New Registered Agent 81 Name EISENBERG, JAV 82 Street Address (P.O. Box Number is Not Acceptable) 9101 NW 57th STREET 83 84 City TAMARAC FL 85 Zip Code 33351

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or 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 accept the obligations of, Section 617.0503, Florida Statutes.  
SIGNATURE: [Signature] DATE: 2/6/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE SD	SCHORR, RICHARD	1.1 TITLE F/D	GENDAL, MARK
NAME	9101 NW 57TH STREET	1.2 NAME	9101 NW 57th STREET
STREET ADDRESS	TAMARAC FL	1.3 STREET ADDRESS	TAMARAC, FL 33351
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE PD	PINCHEVSKY, DAVID	2.1 TITLE T/D	SROKA, PHILLIP
NAME	5701 W. PINE ISLAND ROAD	2.2 NAME	9101 NW 57th STREET
STREET ADDRESS	TAMARAC FL	2.3 STREET ADDRESS	TAMARAC, FL 33351
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE TD	DUBROW, ALAN	3.1 TITLE V/D	
NAME	9101 NW 57TH STREET	3.2 NAME	
STREET ADDRESS	TAMARAC, FL 33351	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE VD	WALDMAN, ARTHUR	4.1 TITLE V/D	ALBOUKREK, ISAAC
NAME	9101 N.W. 57 STREET	4.2 NAME	9101 NW 57th STREET
STREET ADDRESS	TAMARAC FL	4.3 STREET ADDRESS	TAMARAC, FL 33351
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE VD	EISENBERG, JAY	5.1 TITLE P/D	
NAME	9101 N.E. 57THE STREET	5.2 NAME	9101 NW 57th STREET
STREET ADDRESS	TAMARAC FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE VD	KLAWSKY, SHERRY	6.1 TITLE	
NAME	9101 N.W. 57TH STREET	6.2 NAME	
STREET ADDRESS	TAMARAC FL	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE: 2/6/97 DAYTIME PHONE #: 957222660

CR2E037 (9/96)