

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723303

FILED
Mar 19, 2009
Secretary of State

Entity Name: TAMARAC JEWISH CENTER, INC

Current Principal Place of Business:

9101 NW 57 STREET
TAMARAC, FL 33351

New Principal Place of Business:

Current Mailing Address:

9101 NW 57 STREET
TAMARAC, FL 33351

New Mailing Address:

FEI Number: 59-1405955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHORR, RICHARD
9101 NW 57 STREET
TAMARAC, FL 33351 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: P () Delete
Name: SAX, STEVE
Address: 9101 NW 57 STREET
City-St-Zip: TAMARAC, FL

Title: VP () Delete
Name: SCHORR, RICHARD
Address: 9101 NW 57 STREET
City-St-Zip: TAMARAC, FL

Title: VP () Delete
Name: RONIK, MARCI
Address: 9101 NW 57 STREET
City-St-Zip: TAMARAC, FL 33351

Title: VP () Delete
Name: EISENSMITH, JEFFREY
Address: 9101 NW 57 STREET
City-St-Zip: TAMARAC, FL

Title: T () Delete
Name: BROWDY, ALAN
Address: 9101 NW 57 STREET
City-St-Zip: TAMARAC, FL

Title: RS () Delete
Name: MONTAG, JACQUELINE
Address: 9101 NW 57 STREET
City-St-Zip: TAMARAC, FL 33351

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:

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: STEVE SAX

P

03/19/2009

Electronic Signature of Signing Officer or Director

Date