

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State

03-20-2003 90101 040 ****70.00

DOCUMENT # 730704

1. Entity Name

JEWISH COMMUNITY CENTER OF THE GREATER PALM BEACHES, INC.



Principal Place of Business

**3151 N. MILITARY TRAIL
WEST PALM BEACH FL 33409**

Mailing Address

**3151 N. MILITARY TRAIL
WEST PALM BEACH FL 33409**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1582799**

Applied For

Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RICHARD COMITER
222 LAKEVIEW AVE
#800
WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

3801 PGA BLVD, Suite 802

City

PALM BEACH GARDENS FL

Zip Code

33410

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LAMPERT, ARNOLD 2900 LE BATEAU DRIVE PALM BEACH GARDENS FL 33410 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PD DANIELS, STEVE 8651 NATIVE DANCER RD N. PALM BEACH GARDENS FL 33418 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PPD SIMS, NANCY 14 WYCLIFF RD. PALM BEACH GARDENS FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COMITER, RICHARD 2668 NATIVE DANCER RD PALM BEACH GARDENS FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEVY, STACEY 4 SHANNON CIR WEST PALM BEACH FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PAST PRESIDENT ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

3/16/03 (561) 689-7700

CR2E037 (10/02)