

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737796

FILED
Apr 27, 2007
Secretary of State

Entity Name: SAMUEL M. AND HELENE SOREF, JEWISH COMMUNITY CENTER, INC.

Current Principal Place of Business:

6501 W SUNRISE BLVD
FT. LAUDERDALE, FL 33313

New Principal Place of Business:

Current Mailing Address:

6501 W SUNRISE BLVD
FT. LAUDERDALE, FL 33313

New Mailing Address:

FEI Number: 59-1766701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LITOW, LAURENCE S
1 E BROWARD BLVD.
STE 1010
FORT LAUDERDALE, FL 33301 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: MARKS, ALAN
Address: 1040 SE 6TH STREET
City-St-Zip: FT LAUDERDALE, FL 33324

Title: VP () Delete
Name: DELINKO-PETERS, FRANCES
Address: 760 NW 67TH AVENUE
City-St-Zip: PLANTATION, FL 33317

Title: AT () Delete
Name: GERSON, STEVEN
Address: 150 N UNIVERSITY DRIVE SUITE 200
City-St-Zip: PLANTATION, FL 33324

Title: VP () Delete
Name: BERKOVITS, JOE
Address: 8211 W BROWARD BLVD #340
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: VP () Delete
Name: GORODETSKY, LEE
Address: 1004 CYPRESS CREEK RD SUITE 414
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: SEC () Delete
Name: LYNN, JENNIFER
Address: 10681 NW 17TH STREET
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BERKOVITS, JOE
Address: 8211 W. BROWARD BLVD SUITE 340
City-St-Zip: FT LAUDERDALE, FL 33324

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

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

Title: VP (X) Change () Addition
Name: HERSEY, LORI
Address: 13901 SW 31ST STREET
City-St-Zip: DAVIE, FL 33330

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: JENNIFER LYNN

SEC

04/27/2007

Electronic Signature of Signing Officer or Director

Date