

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 740305 (8)

1. Corporation Name
PALM BEACH SECTION, NATIONAL COUNCIL OF JEWISH WOMEN, INC.



Principal Place of Business	Mailing Address
7633 TAHITI LANE APT. 103 LAKE WORTH FL 33467 US	7633 TAHITI LANE APT. 103 LAKE WORTH FL 33467 US

3. Date Incorporated or Qualified 10/03/1977	3a. Date of Last Report 04/12/1995
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2. Principal Place of Business	2a. Mailing Address
21 171 Executive Cir.	26 171 Executive Cir.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27 B
City & State	City & State
23 Boynton Beach, FL	28 Boynton Beach, FL
Zip	Zip
24 33436	29 33436
Country	Country
25 Palm Beach	30 Palm Beach

4. FEI Number 51-0187762	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**DIAMOND, SHIRLEY R
7633 TAHITI LANE, APT. 103
LAKE WORTH FL 33467**

10. Name and Address of New Registered Agent

81 Name	Charlotte L. Silver
82 Street Address (P.O. Box Number is Not Acceptable)	171 Executive Cir.
83	Boynton Beach
84 City	FL
85 Zip Code	33436

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, the sole officer or the appointment as registered agent. I am familiar with, and accept, the obligations of Section 617.0503, Florida Statutes.

SIGNATURE *Charlotte L. Silver* **800001742088**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) **-03/13/96--01113--002/29/96**
***61.25 DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	SULZER, SIMMA	
STREET ADDRESS	332 GLENBROOK DRIVE	
CITY-ST-ZIP	ATLANTIS FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	WISE, JUDITH	
STREET ADDRESS	6980 BITTERBRUSH PL	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BRAFMAN, MARILYN	
STREET ADDRESS	1865 LYNTON CIRCLE	
CITY-ST-ZIP	WELLINGTON FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LEVINE, THELMA	
STREET ADDRESS	219 LAKE SUSAN LANE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	DIAMOND, SHIRLEY R	
STREET ADDRESS	7633 TAHITI LANE, #103	
CITY-ST-ZIP	LAKE WORTH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	YOUNG, RITA	
STREET ADDRESS	371 RIVEREDGE ROAD	
CITY-ST-ZIP	JUPIETER FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Marilyn Brafman	
1.3 STREET ADDRESS	1865 Lynton Circle	
1.4 CITY-ST-ZIP	Wellington, FL 33414	
2.1 TITLE	VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Judith Wise	
2.3 STREET ADDRESS	6980 Bitterbrush Pl	
2.4 CITY-ST-ZIP	Boynton Beach, FL 33437	
3.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Thelma Levine	
3.3 STREET ADDRESS	219 Lake Susan Lane	
3.4 CITY-ST-ZIP	West Palm Beach, FL 33411	
4.1 TITLE	V	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Rita Young	
4.3 STREET ADDRESS	371 Riveredge Rd.	
4.4 CITY-ST-ZIP	Jupiter, FL 33458	
5.1 TITLE	Treasurer	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Charlotte L. Silver	
5.3 STREET ADDRESS	171 Executive Cir.	
5.4 CITY-ST-ZIP	Boynton Beach, FL 33436	
6.1 TITLE	V	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Arlene Malkin	
6.3 STREET ADDRESS	1040 Lawson Cir.	
6.4 CITY-ST-ZIP	Boynton Beach, FL 33437 33437	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Charlotte L. Silver* - **Charlotte L. Silver** **1/29/96** (407) 738-6271
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (12/95)