


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 20, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # N01000005256

1. Entity Name  
 ADOLPH AND ROSE LEVIS JEWISH COMMUNITY CENTER, INC.



Principal Place of Business      Mailing Address

9801 DONNA KLEIN BLVD.      9801 DONNA KLEIN BLVD.  
 BOCA RATON, FL 33428      BOCA RATON, FL 33428

**DO NOT WRITE IN THIS SPACE**



01102005 No Chg-NP      CR2E037 (10/03)

4. FEI Number      Applied For  
 65-1127438      Not Applicable

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

6. Name and Address of Current Registered Agent

JUST, ALLAN  
 9801 DONNA KLEIN BLVD.  
 BOCA RATON, FL 33428

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	IPP COHEN, ED 22662 LEMON TREE LANE BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FEURRING, BEVERLY 6485 ENCLAVE WAY BOCA RATON, FL 33496
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GOLDEN, PHYLLIS 4539 BOCAIRE BLVD. BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PLOUGH, MAURICE JR. 21301 POWERLINE RD., #301 BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/21/05-80043-023 61.25

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: Beverly Feurring      Date: 1-18-05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #