

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000689

FILED
Jan 06, 2012
Secretary of State

Entity Name: FRIENDS OF SIR M. B. DAVIS JEWISH GENERAL HOSPITAL, INC.

Current Principal Place of Business:

100 NE 3RD AVENUE, STE 280
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

100 NE 3RD AVENUE, STE 280
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

3755 COTE-SAINTE-CATHERINE ROAD
A-107
MONTREAL, QC H3T 1E2 CA

FEI Number: 75-2990161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPCO, INC.
2699 SOUTH BAYSHORE DRIVE, 7TH
MIAMI, FL 33133 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: D
Name: STOTLAND, BERNARD
Address: 62 BELVEDERE
City-St-Zip: WESTMOUNT, QC CANADA, OC H3Y 1P8

Title: S
Name: RUBIN, ALLEN F
Address: 794 LEXINGTON AVENUE
City-St-Zip: WESTMOUNT, QC CANADA, OC H3Y 1L1

Title: P
Name: BICK, MYER
Address: 3755 COTE-STE-CATHERINE A107
City-St-Zip: MONTREAL, QC CANADA, OC H3T 1E2

Title: D
Name: DUBROVSKY, RICHARD
Address: 4770 KENT AVENUE, #214
City-St-Zip: MONTREAL, QC CANADA, OC H3W 1H2

Title: C
Name: WECHSLER, GARY CA
Address: 3500 DE MAISONNEUVE WEST #800
City-St-Zip: MONTREAL, QC CANADA, OC H3Z 3C1

I hereby 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 all other like empowered.

SIGNATURE: MYER BICK

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01/06/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date