


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90206 030 ****61.25

DOCUMENT # N04000003029

1. Entity Name
JEWISH HOUSING COUNCIL FOUNDATION, INC.



60034545

Principal Place of Business
 240 S. PINEAPPLE AVE.
 10TH FLOOR
 SARASOTA, FL 34236

Mailing Address
 240 S. PINEAPPLE AVE.
 10TH FLOOR
 SARASOTA, FL 34236

2. Principal Place of Business
1951 N. Honore Ave.

3. Mailing Address
1951 N. Honore Ave.

Suite, Apt. #, etc.

City & State
Sarasota, FL

City & State
Sarasota, FL

Zip
34235

Country

Zip
34235

Country

01302006 Chg-NP CR2E037 (11/05)

4. FEI Number
20-0910348

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

ARBEIT, DARLENE
1951 N HONORE AVE
SARASOTA, FL 34235

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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, 2006

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** Delete

NAME **SEITMAN, MURRAY**

STREET ADDRESS **1951 N HONORE AVENUE**

CITY-ST-ZIP **SARASOTA, FL 34235**

TITLE Change Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE **T** Delete

NAME **COVILLE, WARREN**

STREET ADDRESS **1951 N HONORE AVE**

CITY-ST-ZIP **SARASOTA, FL 34235**

TITLE Change Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE **T** Delete

NAME **GIDWITZ, ALAN**

STREET ADDRESS **1951 N HONORE AVE**

CITY-ST-ZIP **SARASOTA, FL 34235**

TITLE Change Addition

NAME **Gidwitz, Alan**

STREET ADDRESS **1951 N Honore Ave**

CITY-ST-ZIP **Sarasota, FL 34235**

TITLE **D** Delete

NAME **COLLIER, RON**

STREET ADDRESS **1951 N HONORE AVE**

CITY-ST-ZIP **SARASOTA, FL 34235**

TITLE Change Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE **D** Delete

NAME **STULBERG, LOIS**

STREET ADDRESS **1951 N HONORE AVE**

CITY-ST-ZIP **SARASOTA, FL 34235**

TITLE Change Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE **D** Delete

NAME **NEFUSSY, ELI**

STREET ADDRESS **1951 N HONORE AVE**

CITY-ST-ZIP **SARASOTA, FL 34235**

TITLE Change Addition

NAME **VP NeFussy, Eli**

STREET ADDRESS **1951 N. Honore Ave**

CITY-ST-ZIP **Sarasota FL 34235**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Murray Seitman **Murray Seitman, President** **4.10.06** **(941)377.0781**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Sarasota Manatee Jewish Housing Council Foundation Board

Title	First Name	Last Name	Address	City	St	ZIP	Spouse
Mr.	Walt	Ulin	1951 N. Honore Ave.	Sarasota	FL	34235	

ATTACHMENT

60034545

#N04000003029