

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09822

FILED
Feb 23, 2010
Secretary of State

Entity Name: CENTURY PINES JEWISH CENTER, A NONPROFIT CORPORATION

Current Principal Place of Business:

1200 S.W. 136TH AVE
PEMBROKE PINES, FL 33027

New Principal Place of Business:

Current Mailing Address:

1200 S.W. 136TH AVE
PEMBROKE PINES, FL 33027

New Mailing Address:

FEI Number: 59-2545126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, RALPH S
1401 SW 134 WAY C105
PEMBROKE PINES, FL 33027 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: 1VD
Name: BROD, LORRAINE
Address: 1200 SW 130 AVE G304
City-St-Zip: PEMBROKE PINES, FL 33027

Title: PDD
Name: COHEN, RALPH S.
Address: 1401 SW 134 WAY C105
City-St-Zip: PEMBROKE PINES, FL

Title: CD
Name: WIENSENFELD, RUTH
Address: 10050 SW 12TH ST
City-St-Zip: HOLLYWOOD, FL 33027

Title: FSD
Name: BERG, EVA
Address: 1300 SW 170 AVE #213
City-St-Zip: PEMBROKE PINES, FL 33027

Title: 2VD
Name: LANDES, SOL
Address: 550 SW 137 AVE L 408
City-St-Zip: PEMBROKE PINES, FL 33027

Title: TD
Name: MARKS, HARRIET E
Address: 901 SW 141 ST AVE SM305
City-St-Zip: HOLLYWOOD, FL 33027

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: RALPH S. COHEN

PRES

02/23/2010

Electronic Signature of Signing Officer or Director

Date