

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15759

FILED
Jan 03, 2005
Secretary of State

Entity Name: JEWISH FAMILY AND CHILDREN'S SERVICE OF SARASOTA-MANATEE, INCORPORATED

Current Principal Place of Business:

2688 FRUITVILLE RD
SARASOTA, FL 34237 US

New Principal Place of Business:

Current Mailing Address:

2688 FRUITVILLE RD
SARASOTA, FL 34237 US

New Mailing Address:

FEI Number: 59-2693318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, ROSE
5624 BOULDER BLVD
SARASOTA, FL 34233 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: TD () Delete
Name: BLACK, ROBERT
Address: 3060 GRAND BAY BLVD. APT. 136
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VD () Delete
Name: BERKOWITZ, LEE
Address: 1623 TREEHOUSE CIRCLE
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: ACKERMAN, CHARLES
Address: 4903 PEREGRINE PT. WAY
City-St-Zip: SARASOTA, FL 34231

Title: PD () Delete
Name: BRIZZLE, BARBARA
Address: 415 L'AMBIANCE DR.
City-St-Zip: LONGBOAT KEY, FL 34228

Title: M () Delete
Name: CHAPMAN, ROSE
Address: 5624 BOULDER BLVD.
City-St-Zip: SARASOTA, FL 34233

Title: VD () Delete
Name: JACOBSON, SUE
Address: 46 NORTH WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ROSE CHAPMAN

CEO

01/03/2005

Electronic Signature of Signing Officer or Director

Date