2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23485

FILED Apr 30, 2007 Secretary of State

Entity Name: JEWISH CULTURAL ENDOWMENT, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
1022 MAIN	STREET					
SUITE D DUNEDIN,	FL 34698	US				
Current Mailing Address:			New Maili	New Mailing Address:		
1022 MAIN	LOT					
SUITE D						
DUNEDIN,	FL 34698	US				
FEI Number:	59-2861129	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Address of	New Registered Agent:	
TANKEL, F 1022 MAIN SUITE D DUNEDIN,		US				
	named entit	y submits this statement for the	e purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUF	RE:					
		onic Signature of Registered A	gent		 Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title:	SD	() Delete	Title:	() Change () Addition	
Name:	TANKEL, RO		Name:			
Address: City-St-Zip:	1022 MAIN S DUNEDIN, FL		Address: City-St-Zip:			
Title:	PD (() Delete	Title:	() Change () Addition	
Name:	KENT, REVA		Name:			
Address: City-St-Zip:	3136 MASTE CLEARWATE	RS DRIVE ER, FL 33761 US	Address: City-St-Zip:			
Title:	D (()Delete	Title:	() Change () Addition	
Name:	NEWMARK,	* *	Name:	,	,	
Address:		R BAYOU WAY	Address:			
City-St-Zip:	CLEARWATE	ER, FL 33759 US	City-St-Zip:			
Title:		() Delete	Title:	() Change () Addition	
Name: Address:	SOBEL, MICI	MAEL IN WOODS BLVD	Name: Address:			
City-St-Zip:	PALM HARBO		City-St-Zip:			
		() Delete	Title:	D (ILOVICKI, MA) Change (X) Addition	
Title: Name:			Name:	ILOVICKI, IVIA	KIIN	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROBERT L TANKEL S 04/30/2007