


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # N24304	
1. Entity Name HOLOCAUST SURVIVORS CLUB OF BOCA RATON, INC.	

Principal Place of Business FANSHAW C 112 BOCA RATON, FL 33434 US	Mailing Address FANSHAW C 112 BOCA RATON, FL 33434 US
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01042007 No Chg-NP CR2E037 (4/06)

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4. FEI Number 59-2145916	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SAUL BIRNBAUM
 112 FANSHAW C
 BOCA RATON, FL 33434

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BIRNBAUM, SAUL 112 FANSHAW C BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT REICH, HENRY 3028 WOLVERTON B BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RS HABERMAN, ROBERTA 4026 HYPHE B BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FST NEULINGER, MARGARET 4002 EXETER A BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KUPERBERG, ICEK 4038 WOLVERTON B BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 02/21/07-80086-006 66.25

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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: Saul Birnbaum SAUL BIRNBAUM, FEB. 7, 2007 561-451-1986

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #