

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24304

FILED  
Mar 03, 2011  
Secretary of State

**Entity Name:** HOLOCAUST SURVIVORS CLUB OF BOCA RATON, INC.

**Current Principal Place of Business:**

AINSLIE C  
4038  
BOCA RATON, FL 33434 US

**New Principal Place of Business:**

**Current Mailing Address:**

AINSLIE C  
4038  
BOCA RATON, FL 33434 US

**New Mailing Address:**

**FEI Number:** 59-2145916      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FLAPAN, SAM  
AINSLIE C  
4038  
BOCA RATON, FL 33434 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: PD  
Name: FLAPAN, SAM  
Address: 4038 AINSLIE C  
City-St-Zip: BOCA RATON, FL 33434 US

Title: V  
Name: REICH, HENRY  
Address: 3028 WOLVERTON B  
City-St-Zip: BOCA RATON, FL 33434 US

Title: RS  
Name: HABERMAN, ROBERTA  
Address: 4026 HYTHE B  
City-St-Zip: BOCA RATON, FL 33434 US

Title: FST  
Name: NEULINGER, MARGARET  
Address: 4002 EXETER A  
City-St-Zip: BOCA RATON, FL 33434 US

Title: V  
Name: MAKOWITZ, IANDREW  
Address: 4034 REXFORD B  
City-St-Zip: BOCA RATON, FL 33434 US

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: SAM FLAPAN

PRES

03/03/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date