

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 26, 2002 8:00 am**  
**Secretary of State**

02-26-2002 90096 015 \*\*\*\*61.25

**DOCUMENT # N93000000549**

1. Entity Name

**SEPHARDI FEDERATION OF PALM BEACH COUNTY, INC.**

Principal Place of Business

Mailing Address

2701 VILLAGE BLVD.  
 SUITE 404  
 WEST PALM BEACH FL 33409  
 US

2701 VILLAGE BLVD.  
 SUITE 404  
 WEST PALM BEACH FL 33409  
 US

2. Principal Place of Business  
 109 Palomino Drive

3. Mailing Address  
 109 Palomino Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
 Jupiter, FL

City & State  
 Jupiter, FL

Zip  
 33458

Country

Zip  
 33458

Country

4. FEI Number

**65-0395049**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SIMAN, DAVID W**  
**109 PALOMINO DRIVE**  
**JUPITER FL 33458**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete  
 NAME **ALLEN, ROSE PAPPO**  
 STREET ADDRESS **783 FORESTERIA AVE**  
 CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **SD** ☒ Change ☐ Addition  
 NAME **Daisy Alalouf Newell**  
 STREET ADDRESS **18 Flint Way**  
 CITY-ST-ZIP **Boynton Beach, FL 33426**

TITLE **VPD** ☐ Delete  
 NAME **WEISER, VIVIAN**  
 STREET ADDRESS **630 S. LAKESIDE DR.**  
 CITY-ST-ZIP **LAKE WORTH FL 33460**

TITLE **TD** ☒ Change ☐ Addition  
 NAME **Mary Lagnado**  
 STREET ADDRESS **2161 Tigris Drive**  
 CITY-ST-ZIP **West Palm Beach, FL 33411**

TITLE **TD** ☒ Delete  
 NAME **HAKIM, ETTY J**  
 STREET ADDRESS **8170 NADMAR AVE.**  
 CITY-ST-ZIP **BOCA RATON FL 33434**

TITLE **TD** ☒ Change ☐ Addition  
 NAME **Mary Lagnado**  
 STREET ADDRESS **2161 Tigris Drive**  
 CITY-ST-ZIP **West Palm Beach, FL 33411**

TITLE **D** ☐ Delete  
 NAME **SIMAN, DAVID**  
 STREET ADDRESS **109 PALOMINO DR**  
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE **VPD** ☒ Change ☐ Addition  
 NAME **Marie Siegel**  
 STREET ADDRESS **7551 Volley Place**  
 CITY-ST-ZIP **Lake Worth, FL 33462**

TITLE **VPD** ☒ Delete  
 NAME **KARAKOSMERALDI, ROSINA**  
 STREET ADDRESS **12220 -15AG HARBOUR CT.**  
 CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **VPD** ☒ Change ☐ Addition  
 NAME **Marie Siegel**  
 STREET ADDRESS **7551 Volley Place**  
 CITY-ST-ZIP **Lake Worth, FL 33462**

TITLE **PD** ☐ Delete  
 NAME **LAGNADO, DAVID**  
 STREET ADDRESS **12220 15 AG HARBOUR CT.**  
 CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **VPD** ☒ Change ☐ Addition  
 NAME **Marie Siegel**  
 STREET ADDRESS **7551 Volley Place**  
 CITY-ST-ZIP **Lake Worth, FL 33462**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

**SIGNATURE REQUIRED DAVID W LAGNADO**

**02/07/02**

**361-684-7585**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)