

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2007 8:00 am**  
**Secretary of State**

04-26-2007 90189 022 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                          |                                                                                     |                                                                               |                                        |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|----------------------------------------|--|
| <b>DOCUMENT # 703702</b><br>1. Entity Name<br><b>JEWISH FAMILY AND COMMUNITY SERVICES, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                          |                                                                                     |                                                                               |                                        |  |
| Principal Place of Business<br><b>6261 DUPONT STATION CT E<br/>JACKSONVILLE, FL 32217</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                          |                                                                                     | Mailing Address<br><b>6261 DUPONT STATION CT E<br/>JACKSONVILLE, FL 32217</b> |                                        |  |
| 2. Principal Place of Business - No P.O. Box #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                          | 3. Mailing Address                                                                  |                                                                               |                                        |  |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                          | Suite, Apt. #, etc.                                                                 |                                                                               |                                        |  |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                          | City & State                                                                        |                                                                               |                                        |  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                          | Country                                                                             |                                                                               | 4. FEI Number<br><b>59-0637868</b>     |  |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                          | Applied For<br>Not Applicable                                                       |                                                                               |                                        |  |
| 6. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                          | 7. Name and Address of New Registered Agent                                         |                                                                               |                                        |  |
| <b>ANSBACHER, LAWRENCE V<br/>5150 BELFORT RD., BLDG. 100<br/>BELFORT ROAD SOUTH PROFESSIONAL PARK<br/>JACKSONVILLE, FL 32256-6010</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                          | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City                  |                                                                               |                                        |  |
| 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.                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                          | FL Zip Code                                                                         |                                                                               |                                        |  |
| SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                          |                                                                                     |                                                                               |                                        |  |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2007</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                          | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                                               | <b>\$5.00 May Be<br/>Added to Fees</b> |  |
| <b>Make check payable to<br/>Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                          |                                                                                     |                                                                               |                                        |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                          |                                                                                     | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                  |                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VD<br>GARFINKEL, DAVID<br>6261 DUPONT ST. E<br>JACKSONVILLE, FL 32217                    | <input type="checkbox"/> Delete                                                     |                                                                               |                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VTD<br>ZIMMERMAN, SANFORD<br>6261 DUPONT STATION CT., E<br>JACKSONVILLE, FL 32217        | <input type="checkbox"/> Delete                                                     |                                                                               |                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | PD<br>KEMPNER, JIM<br>6261 DUPONT STATION CT. E<br>JACKSONVILLE, FL 32217                | <input type="checkbox"/> Delete                                                     |                                                                               |                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | CD<br>GOTTLIEB, DEBBIE<br>6261 DUPONT STATION CT E<br>JACKSONVILLE, FL 32217             | <input checked="" type="checkbox"/> Delete                                          |                                                                               |                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ED<br>YOUNG, IRIS<br>6261 DUPONT STATION CT E<br>JACKSONVILLE, FL 32217                  | <input type="checkbox"/> Delete                                                     |                                                                               |                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VD<br>WRIGHT, ELAINE<br>6261 DUPONT STATION CT. E<br>JACKSONVILLE, FL 32217              | <input checked="" type="checkbox"/> Delete                                          |                                                                               |                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | P/D<br>                                                                                  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition        |                                                                               |                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | V/D<br>                                                                                  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition        |                                                                               |                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | C/D<br>Kempner, James                                                                    | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition        |                                                                               |                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | V/S/T/D<br>Bruce R. Glassman<br>6261 Dupont Station Court East<br>Jacksonville, FL 32217 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition        |                                                                               |                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | V/D<br>Appel, Caren<br>6261 Dupont Station Court East<br>Jacksonville, FL 32217          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition        |                                                                               |                                        |  |
| 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 approvals. |                                                                                          |                                                                                     |                                                                               |                                        |  |
| <b>SIGNATURE:</b> <i>Iris Young</i> Executive Director 4/17/07 904-448-1933                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                          |                                                                                     |                                                                               |                                        |  |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                          |                                                                                     |                                                                               |                                        |  |

⊗ See attached list for all directors and officers

ATTACHMENT

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #703702

Entity Name: JEWISH FAMILY & COMMUNITY SERVICES, INC.

FEI #59-0637868

40082455

11. Additions to Officers and Directors in 10

| Title     | Name                 | Street Address               | City, State, Zip       |
|-----------|----------------------|------------------------------|------------------------|
| * V/D     | Appel, Caren         | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Bialik, Brian        | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Lauren Block         | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Brodsky, Ernie       | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Caplan, Howard       | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Davis, Richard       | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | DuBow, Helen         | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Efron, Dr. Barry     | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Elinoff, Susan       | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| * P/D     | Garfinkel, David A.  | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| * V/S/T/D | Glassman, Bruce R.   | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Green, Sara          | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Greenhut, Judi       | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Herman, Risa         | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Jolles, Erica        | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| * V/D     | Kempner, Francine    | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| * C/D     | Kempner, James A.    | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Parker, Barbara      | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| V/D       | Pollock, Marsha      | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| V/D       | Price, Jack          | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Resnick, Jeremy      | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Roey, Howard         | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Rosenthal, David     | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Rosner, Ellen        | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Schneider, Barbara   | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Setzer, Melanie      | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Shapiro, Dr. Adam    | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Shumer, Tammy        | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Sussman, Lynn        | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Tanenbaum, Isa       | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Ullmann, Glenn       | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| D         | Warfield, Dr. Steven | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| * V/D     | Zimmerman, Sanford   | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| * V/D     | Zisser, Eunice       | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| * ED      | Young, Iris          | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| CPO       | Lloyd, Colleen       | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |
| CFO       | Gendzier, Susan S.   | 6261 Dupont Station Court, E | Jacksonville, FL 32217 |

D=Director

P=President

V=Vice President

C=Chairman of Board

S/T=Secretary/Treasurer

ED=Executive Director

CPO=Chief Program Officer

CFO=Chief Financial Officer

\* Listed on printed form from State.