

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704147

FILED
Jan 09, 2008
Secretary of State

Entity Name: THE JEWISH FEDERATION OF GREATER ORLANDO, INC.

Current Principal Place of Business:

851 N. MAITLAND AVE.
MAITLAND, FL 327944426 US

New Principal Place of Business:

Current Mailing Address:

851 N. MAITLAND AVE.
PO BOX 941508
MAITLAND, FL 327941508 US

New Mailing Address:

FEI Number: 59-0946923 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BODNER, SUSAN
851 N MAITLAND AVE
MAITLAND, FL 327514426 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: T () Delete
Name: KANE, STEVEN
Address: 522 WINDING CREEK WAY
City-St-Zip: LONGWOOD, FL 32779

Title: C () Delete
Name: APPELBAUM, RICHARD
Address: 21 MAITLAND GROVES
City-St-Zip: MAITLAND, FL 32751

Title: S () Delete
Name: WEINREICH, BARBARA
Address: 1323 ANCHOR CT
City-St-Zip: ORLANDO, FL 32804

Title: P () Delete
Name: BODNER, SUSAN
Address: 851 N. MAITLAND AVENUE
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN W. DEAN, STAFF ACCOUNTANT

ACCT

01/09/2008

Electronic Signature of Signing Officer or Director

_____ Date