DOCUMENT# 703702

Entity Name: JEWISH FAMILY AND COMMUNITY SERVICES, INC.

### Current Principal Place of Business:

8540 BAYCENTER ROAD JACKSONVILLE, FL 32256

## **Current Mailing Address:**

8540 BAYCENTER ROAD JACKSONVILLE, FL 32256 US

## FEI Number: 59-0637868

# Name and Address of Current Registered Agent:

ANSBACHER, LAWRENCE V 5150 BELFORT RD., BLDG. 100 BELFORT ROAD SOUTH PROFESSIONAL PARK JACKSONVILLE, FL 32256-6010 US Certificate of Status Desired: No

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

## **Officer/Director Detail :**

Officer/Direc			
Title	DIRECTOR	Title	DIRECTOR
Name	SETZER, DEBRA	Name	FORTUNE, RACHAEL
Address	8540 BAYCENTER ROAD	Address	8540 BAYCENTER ROAD
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256
Title	ED	Title	CFO
Name	RODRIGUEZ, COLLEEN	Name	GIBSON, NELSON J
Address	8540 BAYCENTER ROAD	Address	8540 BAYCENTER ROAD
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256
Title	VP	Title	IMMEDIATE PAST PRESIDENT
Title Name	VP JOHNSON, SHERYL	Title Name	IMMEDIATE PAST PRESIDENT GOLDMAN, STEPHEN
Name	JOHNSON, SHERYL	Name	GOLDMAN, STEPHEN
Name Address	JOHNSON, SHERYL 8540 BAYCENTER ROAD	Name Address	GOLDMAN, STEPHEN 8540 BAYCENTER ROAD
Name Address City-State-Zip:	JOHNSON, SHERYL 8540 BAYCENTER ROAD JACKSONVILLE FL 32256	Name Address City-State-Zip:	GOLDMAN, STEPHEN 8540 BAYCENTER ROAD JACKSONVILLE FL 32256
Name Address City-State-Zip: Title	JOHNSON, SHERYL 8540 BAYCENTER ROAD JACKSONVILLE FL 32256 DIRECTOR	Name Address City-State-Zip: Title	GOLDMAN, STEPHEN 8540 BAYCENTER ROAD JACKSONVILLE FL 32256 DIRECTOR
Name Address City-State-Zip: Title Name	JOHNSON, SHERYL 8540 BAYCENTER ROAD JACKSONVILLE FL 32256 DIRECTOR SACHS, JOSH	Name Address City-State-Zip: Title Name	GOLDMAN, STEPHEN 8540 BAYCENTER ROAD JACKSONVILLE FL 32256 DIRECTOR JOSEPH, CHARLES

# Continues on page 2

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: NELSON GIBSON	CFO	01/28/2021
Electronic Oliver terre of Oliverian Office a/Director	Detell	

Electronic Signature of Signing Officer/Director Detail

FILED Jan 28, 2021 Secretary of State 0085000221CC

Date

Date

### **Officer/Director Detail Continued :**

Title	PRESIDENT
Name	LOEB, DAVID
Address	8540 BAYCENTER ROAD
City-State-Zip:	JACKSONVILLE FL 32256
Title	DIRECTOR
Name	LUFRANO, MATTHEW
Address	8540 BAYCENTER ROAD
City-State-Zip:	JACKSONVILLE FL 32256
Title	DIRECTOR
Name	RICKOFF, MATT
Address	8540 BAYCENTER ROAD
City-State-Zip:	JACKSONVILLE FL 32256
Title	DIRECTOR
Name	RUSSELL, MIKE
Address	8540 BAYCENTER RD
City-State-Zip:	JACKSONVILLE FL 32256
Title	DIRECTOR
Name	PRICE, NED
Address	8540 BAYCENTER ROAD
City-State-Zip:	JACKSONVILLE FL 32256
Title	DIRECTOR
Name	D'ARIENZO, JUSTIN
Address	8540 BAYCENTER ROAD
City-State-Zip:	JACKSONVILLE FL 32256
Title	DIRECTOR
Name	SHERMAN, STEVEN
Address	8540 BAYCENTER ROAD
City-State-Zip:	JACKSONVILLE FL 32256

Title	TREASURER
Name	LAWSON, JAMES
Address	8540 BAYCENTER ROAD
City-State-Zip:	JACKSONVILLE FL 32256
Title	TREASURER
Name	ROSTHOLDER, ERIK
Address	8540 BAYCENTER RD
City-State-Zip:	JACKSONVILLE FL 32256
Title	DIRECTOR
Name	SISISKY, KIMBERLY
Address	8540 BAYCENTER ROAD
City-State-Zip:	JACKSONVILLE FL 32256
Title	VP
Name	SANDLER, DANIEL
Address	8540 BAYCENTER RD
City-State-Zip:	JACKSONVILLE FL 32256
City-State-Zip: Title	JACKSONVILLE FL 32256 SECRETARY
Title	SECRETARY
Title Name	SECRETARY LUIKART, CHRISTEN
Title Name Address	SECRETARY LUIKART, CHRISTEN 8540 BAYCENTER ROAD
Title Name Address City-State-Zip:	SECRETARY LUIKART, CHRISTEN 8540 BAYCENTER ROAD JACKSONVILLE FL 32256
Title Name Address City-State-Zip: Title	SECRETARY LUIKART, CHRISTEN 8540 BAYCENTER ROAD JACKSONVILLE FL 32256 DIRECTOR
Title Name Address City-State-Zip: Title Name	SECRETARY LUIKART, CHRISTEN 8540 BAYCENTER ROAD JACKSONVILLE FL 32256 DIRECTOR NEIHAUS, STEVEN
Title Name Address City-State-Zip: Title Name Address	SECRETARY LUIKART, CHRISTEN 8540 BAYCENTER ROAD JACKSONVILLE FL 32256 DIRECTOR NEIHAUS, STEVEN 8540 BAYCENTER ROAD
Title Name Address City-State-Zip: Title Name Address City-State-Zip:	SECRETARY LUIKART, CHRISTEN 8540 BAYCENTER ROAD JACKSONVILLE FL 32256 DIRECTOR NEIHAUS, STEVEN 8540 BAYCENTER ROAD JACKSONVILLE FL 32256
Title Name Address City-State-Zip: Title Name Address City-State-Zip: Title	SECRETARY LUIKART, CHRISTEN 8540 BAYCENTER ROAD JACKSONVILLE FL 32256 DIRECTOR NEIHAUS, STEVEN 8540 BAYCENTER ROAD JACKSONVILLE FL 32256 DIRECTOR