

**2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 725798

**Entity Name:** THE ARTHUR I. MEYER JEWISH ACADEMY, INC.

**Current Principal Place of Business:**

5225 HOOD RD.  
PALM BEACH GARDENS, FL 33418

**Current Mailing Address:**

5225 HOOD RD.  
PALM BEACH GARDENS, FL 33418 US

**FEI Number:** 59-1491258

**Certificate of Status Desired:** No

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

LICKSTEIN, DAVID DR.  
5225 HOOD RD.  
PALM BEACH GARDENS, FL 33418 US

*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:** DR. DAVID LICKSTEIN

08/03/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TRUSTEE  
Name LEIBOWITZ, MIKI  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title TRUSTEE  
Name LICKSTEIN, DAVID DR.  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title PRESIDENT  
Name SHULMAN, JEFFREY  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title TRUSTEE  
Name BERG, SOCKI  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title TRUSTEE  
Name COMITER, ANDREW  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title TRUSTEE  
Name FELD, MARJORIE  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title TRUSTEE  
Name FISHMAN, MARJORIE  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title VP  
Name LAMPERT, ANTHONY  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

**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:** JOYCE MCCORD

**CHIEF FINANCIAL  
OFFICER**

08/03/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title SECRETARY  
Name LEVINE, SHERRI  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title TRUSTEE  
Name ROSENTHAL, STEVEN  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title CFO  
Name MCCORD, JOYCE  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title EXECUTIVE DIRECTOR  
Name COHEN, CHARLES  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title TRUSTEE  
Name MILLER, HARRIET  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title TREASURER  
Name TART, JEFFREY  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title PRINCIPAL  
Name DANGERFIELD, LESLIE  
Address 5225 HOOD RD.  
City-State-Zip: PALM BEACH GARDENS FL 33418