

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005247

**Entity Name:** HEBREW HOMES HEALTH NETWORK FOUNDATION, INC.

**Current Principal Place of Business:**

16855 NE 2ND AVE UNIT N400  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

16855 NE 2ND AVE UNIT N400  
NORTH MIAMI BEACH, FL 33162 US

**FEI Number:** 65-1040934

**Certificate of Status Desired:** No

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

LOWY, RONALD S.  
LOWY AND COOK, P.A.  
501 N.E. 1ST AVENUE SUITE 200  
MIAMI, FL 33132 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:** RONALD S. LOWY

06/22/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name BLOOM, ELAINE  
Address 16855 NE 2ND AVE UNIT N400  
City-State-Zip: NMB FL 33162

*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:** ELAINE BLOOM

CEO

06/22/2020

Electronic Signature of Signing Officer/Director Detail

Date