

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

DOCUMENT# N06000010562

**FILED**  
**Jun 30, 2020**  
**Secretary of State**  
**8355940556CC**

**Entity Name:** CHABAD OF EAST LAKE WORTH, GREENACRES & ATLANTIS, INC.

**Current Principal Place of Business:**

6450 MELLALUCA LANE  
LAKE WORTH, FL 33463

**Current Mailing Address:**

6701 FINAMORE CIR  
LAKE WORTH, FL 33467 US

**FEI Number: 41-2216661**

**Certificate of Status Desired: No**

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

ROSENFELD, MENACHEM M  
6701 FINAMORE CIR  
LAKE WORTH, FL 33467 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DP  
Name ROSENFELD, MENACHEM M  
Address 6701 FINAMORE CIR  
City-State-Zip: LAKE WORTH FL 33467

Title DVST  
Name SCHOCHET, DEVORAH L  
Address 6701 FINAMORE CIR  
City-State-Zip: LAKE WORTH FL 33467

Title D  
Name ROSENBERG, RAFI  
Address 2045 NE 186 DRIVE  
City-State-Zip: SKYLAKE FL 33179

Title D  
Name SILBERBERG, ELI N  
Address 6605 N WHIPPLE STREET  
City-State-Zip: CHICAGO IL 60645

Title D  
Name DRUIN, MICHOEL  
Address 1061 N.E. 180TH TERRACE  
City-State-Zip: NORTH MIAMI BEACH 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: MENACHEM M ROSENFELD**

**DP**

**06/30/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date