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.

Ρ

SIGNATURE: ARNOLD MITTELMAN

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent **Officer/Director Detail :** 

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.

	Title	Р	Title	TS
	Name	MITTELMAN, ARNOLD	Name	MOSS, JEFFREY B
	Address	7400 MONACO STREET	Address	11 RIVERSIDE DR #8UE
	City-State-Zip:	CORAL GABLES FL 33143	City-State-Zip:	NEW YORK NY 10023
	Title	D		
	Title Name	D ELLENSTEIN, DAVID		
	Name	ELLENSTEIN, DAVID		

### FEI Number: 26-1293523

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

SIGNATURE:

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0700009638

Entity Name: NATIONAL JEWISH THEATER FOUNDATION, INC.

# **Current Principal Place of Business:**

7400 MONACO STREET CORAL GABLES, FL 33143

## **Current Mailing Address:**

7700 LOS PINOS BLVD CORAL GABLES. FL 33143-6450

FILED Feb 17, 2021 Secretary of State 0511725794CC

Certificate of Status Desired: No

Date

02/17/2021

Date