

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09822

**FILED**  
**Jun 12, 2013**  
**Secretary of State**  
**CC9949677707**

**Entity Name:** CENTURY PINES JEWISH CENTER, A NONPROFIT CORPORATION

**Current Principal Place of Business:**

1200 S.W. 136TH AVE  
PEMBROKE PINES, FL 33027

**Current Mailing Address:**

1200 S.W. 136TH AVE  
PEMBROKE PINES, FL 33027

**FEI Number:** 59-2545126

**Certificate of Status Desired:** No

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

COHEN, RALPH SPRES  
1401 SW 134 WAY  
105  
PEMBROKE PINES, FL 33027 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            PRES  
Name            COHEN, RALPH S  
Address        1401 SW134 WAY APT 105  
City-State-Zip: PEMBROKE PINES FL 33027

Title            1VP  
Name            LANDES, SOL  
Address        550 SW 137 AVE APT 408  
City-State-Zip: PEMBROKE PINES FL 33027

Title            2VP  
Name            WIESENFELD, RUTH  
Address        12950 SW 13TH ST APT 206  
City-State-Zip: PEMBROKE PINES FL 33027

Title            FSEC  
Name            BERG, EVA  
Address        1300 SW 130 AVE #213  
City-State-Zip: PEMBROKE PINES FL 33027

Title            TRES  
Name            CODER, BERNICE  
Address        12750 SW 4 CT  
City-State-Zip: PEMBROKE PINES FL 33027

*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:** RUTH WIESENFELD

**2ND V. PRES**

**06/12/2013**

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

\_\_\_\_\_  
Date