

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000003530

FILED
Apr 08, 2020
Secretary of State
0437827102CC

Entity Name: JEWISH FAMILY SERVICES OF BROWARD FOUNDATION, INC.

Current Principal Place of Business:

5890 S. PINE ISLAND ROAD
SUITE 201
DAVIE, FL 33328

Current Mailing Address:

5890 S. PINE ISLAND ROAD
SUITE 201
DAVIE, FL 33328

FEI Number: 46-5507093

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JOHNSON, BARRY E
5890 S. PINE ISLAND ROAD
SUITE 201
DAVIE, FL 33328 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: BARRY E. JOHNSON

04/08/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SD
Name ROSS, SHELDON DR
Address 5890 S. PINE ISLAND ROAD
SUITE 201
City-State-Zip: DAVIE FL 33328

Title TD
Name WISE, SETH
Address 5890 S. PINE ISLAND ROAD
SUITE 201
City-State-Zip: DAVIE FL 33328

Title DIRECTOR
Name GOODMAN, STANLEY
Address 5890 S. PINE ISLAND ROAD
SUITE 201
City-State-Zip: DAVIE FL 33328

Title DIRECTOR
Name GOODMAN, PEARL
Address 5890 S. PINE ISLAND ROAD
SUITE 201
City-State-Zip: DAVIE FL 33328

Title DIRECTOR
Name JACKMAN, STEPHEN
Address 5890 S. PINE ISLAND ROAD
SUITE 201
City-State-Zip: DAVIE FL 33328

Title CHAIRMAN
Name COHN, ALAN
Address 5890 S. PINE ISLAND ROAD
SUITE 201
City-State-Zip: DAVIE FL 33328

Title BOARD MEMBER
Name NEUMAN, GIL
Address 5890 S. PINE ISLAND ROAD
SUITE 201
City-State-Zip: DAVIE FL 33328

Title BOARD MEMBER
Name SCHULMAN, DAVID
Address 5890 S. PINE ISLAND ROAD
SUITE 201
City-State-Zip: DAVIE FL 33328

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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: BARRY JOHNSON

**CHIEF FINANCIAL
OFFICER**

04/08/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CEO
Name RAHMAN, LISA
Address 5890 S. PINE ISLAND ROAD
SUITE 201
City-State-Zip: DAVIE FL 33328

Title DIRECTOR
Name BRODIE, MICHAEL
Address 5890 S. PINE ISLAND ROAD
SUITE 201
City-State-Zip: DAVIE FL 33328

Title CFO
Name JOHNSON, BARRY
Address 5890 S. PINE ISLAND ROAD
SUITE 201
City-State-Zip: DAVIE FL 33328