

2015 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N14000003530

**FILED
Dec 02, 2015
Secretary of State
CR2784639223**

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

Current Principal Place of Business:

100 S. PINE ISLAND ROAD
SUITE 230
PLANTATION, FL 33324

Current Mailing Address:

100 S. PINE ISLAND ROAD
SUITE 230
PLANTATION, FL 33324

FEI Number: 46-5507093

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COHN, ALAN B
200 E. BROWARD BOULEVARD
SUITE 1800
FORT LAUDERDALE, FL 33301 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: ALAN B. COHN

12/02/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name BRODIE, MICHAEL
Address 100 S. PINE ISLAND ROAD
SUITE 230
City-State-Zip: PLANTATION FL 33324

Title SD
Name ROSS, SHELDON DR
Address 100 S. PINE ISLAND ROAD
SUITE 230
City-State-Zip: PLANTATION FL 33324

Title TD
Name WISE, SETH
Address 100 S. PINE ISLAND ROAD
SUITE 230
City-State-Zip: PLANTATION FL 33324

Title D
Name SCHREIBER, JACOB
Address 100 S. PINE ISLAND ROAD
City-State-Zip: PLANTATION FL 33324

Title D
Name SCHWARTZ, SHARON
Address 100 S. PINE ISLAND ROAD
SUITE 230
City-State-Zip: PLANTATION FL 33324

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: JACOB SCHREIBER

DIRECTOR

12/02/2015

Electronic Signature of Signing Officer/Director Detail

Date