## 2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N15000002850

Entity Name: JEWISH FAMILY HOME CARE, INC.

Current Principal Place of Business:

5890 S. PINE ISLAND ROAD,

SUITE 200 DAVIE, FL 33328

**Current Mailing Address:** 

5890 S. PINE ISLAND ROAD,

SUITE 200

DAVIE, FL 33328 US

FEI Number: 47-3467060 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COHN, ALAN B 200 E.BROWARD BLVD., SUITE 1800 FT.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:

Electronic Signature of Registered Agent

Date

FILED Apr 07, 2020

Secretary of State 9947618983CC

Officer/Director Detail:

Title D Title D

Name BRODIE, MICHAEL Name ROSS, SHELDON

Address 5890 S. PINE ISLAND ROAD, SUITE200 Address 5890 S. PINE ISLAND ROAD, SUITE

200

City-State-Zip: DAVIE FL 33328 City-State-Zip: DAVIE FL 33328

Title D Title D

Name WISE, SETH Name SCHWARTZ, SHARON

Address 5890 S. PINE ISLAND ROAD, SUITE Address 5890 S. PINE ISLAND ROAD, SUITE

City-State-Zip: DAVIE FL 33328 City-State-Zip: DAVIE FL 33328

Title D, CEO, PRESIDENT Title D, CHAIRMAN

Name DUVALL, TERESA Name JACKMAN, STEPHEN

Address 5890 S. PINE ISLAND ROAD, Address 5890 S. PINE ISLAND ROAD,

SUITE 200 SUITE 200

City-State-Zip: DAVIE FL 33328 City-State-Zip: DAVIE FL 33328

Title DIRECTOR OF FINANCE

Name TRAUB, LEONARD

5890 S PINE ISLAND RD SUITE 200

City-State-Zip: DAVIE FL 33328

Address

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: LEONARD TRAUB

DIRECTOR OF FINANCE

04/07/2020