

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000011119

**FILED  
Mar 04, 2016  
Secretary of State  
CC2144601662**

**Entity Name:** JEWISH COMMUNITY WATCH, INC.

**Current Principal Place of Business:**

909 N. MIAMI BEACH BLVD.  
UNIT 502  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

909 N. MIAMI BEACH BLVD.  
UNIT 502  
NORTH MIAMI BEACH, FL 33162 US

**FEI Number: 46-1731066**

**Certificate of Status Desired: No**

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

SEEWALD, MEYER A  
909 N. MIAMI BEACH BLVD.  
UNIT 502  
NORTH MIAMI BEACH, FL 33162 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           CEOP  
Name           SHAPIRO, DAVID  
Address        909 N. MIAMI BEACH BLVD.  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title           T  
Name           PASTERNAK, ABE  
Address        909 N. MIAMI BEACH BLVD.  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title           D  
Name           BLAU, RABBI Y  
Address        909 N. MIAMI BEACH BLVD.  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title           DC  
Name           NASH, ELI  
Address        909 N. MIAMI BEACH BLVD.  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title           D  
Name           SEEWALD, MEYER  
Address        909 N. MIAMI BEACH BLVD.  
City-State-Zip: NORTH MIAMI BEACH FL 33162

*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: DAVID SHAPIRO**

**CEO**

**03/04/2016**

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

Date