

**2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N18349

**Entity Name:** THE DAVE AND MARY ALPER JEWISH COMMUNITY CENTER, INC.

**FILED**  
**Jun 24, 2015**  
**Secretary of State**  
**CC8904152254**

**Current Principal Place of Business:**

11155 SW 112 AVE  
MIAMI, FL 33176

**Current Mailing Address:**

11155 SW 112 AVE  
MIAMI, FL 33176 US

**FEI Number: 59-2736411**

**Certificate of Status Desired: No**

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

TEPPER, STEVE  
DAVE AND MARY ALPER JEWISH COMMUNITY CENTE  
11155 SW 112 AVENUE  
MIAMI, FL 33176 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: STEVE TEPPER**

**06/24/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title ED  
Name TEPPER, STEVE  
Address 11155 SW 112 AVE.  
City-State-Zip: MIAMI FL 33176

Title TREASURER  
Name CAMBER, RACHEL  
Address 11155 SW 112 AVE  
City-State-Zip: MIAMI FL 33176

Title VP  
Name COHEN, DANA  
Address 11155 SW 112 AVE  
City-State-Zip: MIAMI FL 33176

Title PRESIDENT  
Name RADER, JOSH  
Address 11155 SW 112 AVENUE  
City-State-Zip: MIAMI FL 33176

Title VP  
Name GLASSER, GREG  
Address 11155 SW 112 AVE  
City-State-Zip: MIAMI FL 33176

Title VP  
Name QUIAT, BETTE ELLEN  
Address 11155 SW 112 AVE  
City-State-Zip: MIAMI FL 33176

Title SECRETARY  
Name GINSBURG, KEITH  
Address 11155 SW 112 AVE  
City-State-Zip: MIAMI FL 33176

*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: STEVE TEPPER**

**ED**

**06/24/2015**

Electronic Signature of Signing Officer/Director Detail

Date