

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703702

FILED
Apr 29, 2005
Secretary of State

Entity Name: JEWISH FAMILY AND COMMUNITY SERVICES, INC.

Current Principal Place of Business:

6261 DUPONT STATION CT E
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

6261 DUPONT STATION CT E
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 59-0637868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANSBACHER, LAWRENCE V
5150 BELFORT RD., BLDG. 100
BELFORT ROAD SOUTH PROFESSIONAL PARK
JACKSONVILLE, FL 322566010 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: GARFINKEL, DAVID
Address: 6261 DUPONT ST. E
City-St-Zip: JACKSONVILLE, FL 32217

Title: VD () Delete
Name: ZIMMERMAN, SANDY
Address: 6261 DUPONT STATION CT., E
City-St-Zip: JACKSONVILLE, FL 32217

Title: P () Delete
Name: KEMPNER, JIM
Address: 6261 DUPONT STATION CT. E
City-St-Zip: JACKSONVILLE, FL 32217

Title: C () Delete
Name: GOTTLIEB, DEBBIE
Address: 6261 DUPONT STATION CT E
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: YOUNG, IRIS
Address: 6261 DUPONT STATION CT E
City-St-Zip: JACKSONVILLE, FL 32217

Title: VD () Delete
Name: WRIGHT, ELAINE
Address: 6261 DUPONT STATION CT. E
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRENDA SHEPHARD

CFO

04/29/2005

Electronic Signature of Signing Officer or Director

Date