-^ 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 705135 1. Entity Name JEWISH FAMILY SERVICE INC OF BROWARD COUNTY, FLORIDA									F	LED	07	
Principal Place of Business 100 S. PINE ISLAND RD. #230 PLANTATION, FL 33324 US				Mailing Address 100 S. PINE ISLAND RD. #230 PLANTATION, FL 33324 US				SECRETARY OF STATE TALLAHASSEE, FLORIDA				
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				08112005 Ch	ng-NP CR2E	037 (10/03)		
City & State			City & State					4. FEI Number 59-099510	6) 	oplied For	
Zip	Country		Zip		Cou	Country		5. Certificate of Sta	atus Desired	\$8.75 Add	ditional	
	6. Name	and Address of Current	Registere	legistered Agent			7. Name and Address of New Registered Agent — — Name					
COHN, ALAN B. 2021 TYLER STREET HOLLYWOOD, FL 33020						Street Address (P.O. Box Number is Not Acceptable)						
			City			F	L Zip Cod	le				
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or not the State of Elorida, Itan familiar with, and act the obligations of registered agent. ##61.25												
SIGNATURE Signature, typed or printed name of registered agent and title II applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
Amended AR Is \$61.25 9. Election Campa Trust Fund Con								\$5.00 May Be Added to Fees		ck payable t artment of S		
10.	Р	OFFICERS AND DIF					7		ES TO OFFICERS AND			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COHN, AL 2021 TYL	.AN ER STREET OOD, FL 33020	_ ·			E IE EET ADDRESS '-ST-ZIP	LUN	NDY, RICHARD 0 S. Pine Island Rd #230 lantation, FL 33324				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CARR, PAULA 674 WEST TROPICAL WAY FORT LAUDERDALE, FL 33317			S		E EET ADDRESS '-ST-ZIP	MOS 100 Pla	KOWITZ, KENNETH Change Addition S. Pine Island Rd #230 antation, FL 33324			Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		STEVEN IE ISLAND RD STE 230 ION, FL 33324	ı	Delete TITLE NAMI STRE						☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	l	SCOTT NVER DRIVE DOD, FL 33026		☐ Delete		- 1			R	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IPP WELLINS, STEVEN 101 NW 108 WAY FORT LAUDERDALE, FL 33324			☐ Delete TITL NAM STRI				Clange Applition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete						Change	Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.												
SIGNATURE: Kenneth Moskowitz 8/11/05 (954)370-2140 SIGNATURE AND TYPED OF PRINTER NAME OF SIGNING OFFICER OR DIRECTOR Date Date												