2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705135

FILED Jan 05, 2010 Secretary of State

Entity Name: JEWISH FAMILY SERVICE INC OF BROWARD COUNTY, FLORIDA

Current Principal Place of Business: New Principal Place of Business:

100 S. PINE ISLAND RD.

#230

PLANTATION, FL 33324 US

Current Mailing Address: New Mailing Address:

100 S. PINE ISLAND RD.

#230

PLANTATION, FL 33324 US

FEI Number: 59-0995106 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MOSKOWITZ, KENNETH 100 S PINE ISLAND ROAD #230 PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: IPP

 Name:
 LIEBERMAN, DAVID

 Address:
 133 LAUREL ROAD

 City-St-Zip:
 HOLLYWOOD, FL 33021

Title: VPPP Name: LEVY, JANE

Address: 3360 BRIDLE PATH LANE City-St-Zip: WESTON, FL 33331

Title: S

Name: TELLES, SELMA
Address: 233 JACARANDA DRIVE
City-St-Zip: PLANTATION, FL 33324

Title: F

 Name:
 SHARON, SCHWARTZ

 Address:
 10040 NW 14 ST

 City-St-Zip:
 PLANTATION, FL 33324

Title: 7

Name: SCHULMAN, DAVID

Address: 1000 CORPORATE DR 7TH FLOOR City-St-Zip: FORT LAUDERDALE, FL 33324

Title: ED

 Name:
 MOSKOWITZ, KENNETH

 Address:
 100 S PINE ISLAND RD #230

 City-St-Zip:
 PLANTATION, FL 33324

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: KENNETH MOSKOWITZ ED 01/05/2010