

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

DOCUMENT # 714937 (0)

96 JUN 10 PM 4:42

1. Corporation Name
JEWISH FEDERATION OF GREATER FORT LAUDERDALE, INC.



Principal Place of Business Mailing Address
8358 W OAKLAND PARK BLVD FT LAUDERDALE FL 33351 **8358 W OAKLAND PARK BLVD FT LAUDERDALE FL 33351**

3. Date Incorporated or Qualified **07/12/1968** 3a. Date of Last Report **05/01/1995**
4. FEI Number **59-1227585** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 25 Country 28 Zip 30 Country

9. Name and Address of Current Registered Agent
**WASCH, MICHELE
8358 W OAKLAND PARK BLVD
FT LAUDERDALE FL 33321**

10. Name and Address of New Registered Agent
81 Name **DAVID K. BLATTNER, ESQ.**
82 Street Address (P.O. Box Number is Not Acceptable) **200 E BROWARD BLVD**
83
84 City **FT LAUDERDALE FL** 85 Zip Code **33301**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1996	
TITLE	TD <input type="checkbox"/> DELETE	1.1 TITLE	
NAME	EPSTEIN, STUART	1.2 NAME	
STREET ADDRESS	1700 NW 97 AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	1.4 CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	President, Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PRESS, MARTIN	2.2 NAME	Charlotte Padek
STREET ADDRESS	500 E BROWARD BLVD SUITE 1130	2.3 STREET ADDRESS	460 BONAVENTURE BLVD
CITY-ST-ZIP	FT LAUDERDALE FL	2.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33326
TITLE	V <input checked="" type="checkbox"/> DELETE	3.1 TITLE	VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WASCH, MICHELE	3.2 NAME	GARY RUBIN
STREET ADDRESS	8358 W OAKLAND PARK BLVD	3.3 STREET ADDRESS	8358 W OAKLAND PARK BLVD
CITY-ST-ZIP	FT LAUDERDALE FL	3.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33351
TITLE	PD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	VICE PRESIDENT DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PRESS, MARTIN R	4.2 NAME	HOWARD HOROWITZ
STREET ADDRESS	500 E BROWARD BLVD	4.3 STREET ADDRESS	7771 W OAKLAND PARK BLVD
CITY-ST-ZIP	FT LAUDERDALE FL	4.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33351
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **GARY RUBIN** Date: **6/4/96** Daytime Phone #: **954 748-8400**

CR2E037 (12/95)