

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725637

FILED
Jan 15, 2004
Secretary of State**Entity Name:** GREATER MIAMI SECTION NATIONAL COUNCIL OF JEWISH WOMEN, INC.**Current Principal Place of Business:**4221 PINE TREE DR
MIAMI BCH, FL 33140**New Principal Place of Business:****Current Mailing Address:**4221 PINE TREE DR
MIAMI BCH, FL 33140**New Mailing Address:****FEI Number:** 59-6192641**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DANA M KAUFMAN
4700 SHERIDAN ST
BLDG N
HOLLYWOOD, FL 33021**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: PD () Delete
Name: GLICKSTEIN, JOAN
Address: 4221 PINE TREE DR
City-St-Zip: MIAMI BCH, FL 33140

Title: VP () Delete
Name: RODRIGUEZ, LAURA
Address: 8010 NOREMAC AVENUE
City-St-Zip: MIAMI BEACH, FL 33141

Title: VD () Delete
Name: LOWENSTEIN, MARCY
Address: 4221 PINE TREE DR
City-St-Zip: MIAMI BCH, FL 33140

Title: TD () Delete
Name: SINGER, BETSY
Address: 4221 PINE TREE DR
City-St-Zip: MIAMI BCH, FL 33140

Title: VD () Delete
Name: COHEN, MONI
Address: 4221 PINE TREE DR
City-St-Zip: MIAMI BCH, FL 33140

Title: VD (X) Delete
Name: STEIN, ALISSA
Address: 4221 PINE TREE DR
City-St-Zip: MIAMI BCH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RODRIGUEZ, LAURA
Address: 8010 NOREMAC AVENUE
City-St-Zip: MIAMI BCH, FL 33141

Title: VP (X) Change () Addition
Name: PACKAR, SHARLANE
Address: 1210 - 99 ST.
City-St-Zip: BAY HARBOUR ISLANDS, FL 33154

Title: VP (X) Change () Addition
Name: ROTHLEIN, ALANA
Address: 607 W. 47 STREET
City-St-Zip: MIAMI BCH, FL 33140

Title: VP (X) Change () Addition
Name: WOLLOCH, EMMANUELA
Address: 4495 NAUTILUS DRIVE
City-St-Zip: MIAMI BCH, FL 33140

Title: VP (X) Change () Addition
Name: KAPLAN, LESLIE
Address: 305 N. HIBISCUS
City-St-Zip: MIAMI BCH, FL 33139

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: LAURA RODRIGUEZ

PD

01/15/2004

Electronic Signature of Signing Officer or Director

Date