## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

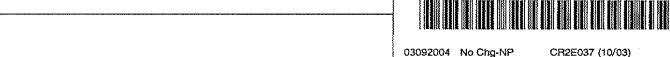
## **DOCUMENT # 727371**

1. Entity Name JEWISH COMMUNITY CENTER OF LEE COUNTY, INC

**FILED** Mar 16, 2004 08:00 AM Secretary of State

Principal Place of Business 702 SE 24 AVENUE CAPE CORAL, FL 33990

Mailing Address 702 SE 24 AVENUE CAPE CORAL, FL 33990



4. FEI Number

CR2E037 (10/03)

Applied For 23-7368563 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FOX, MORRIS B 4020 DEL PRADO BLVD SUITE A-1 CAPE CORAL, FL 33904

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8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
	Filing Fee is \$61.25 Due by May 1, 2004	Election Campaign Financing     Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000089934 03/16/04-80008-025 61.25
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TANENBAUM, ARTHUR DR 2219 SAGRMORE PL CAPE CORAL, FL 33914				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NUDEL, MARC 402 S.E. 30TH TERRACE CAPE CORAL, FL 33904				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PADOLL, BILL 1207 SE 6TH TERR CAPE CORAL, FL 33990		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BELKIN, SAMUEL 17854 ACACIA DR NORTH FORT MYERS, FL 33917				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GRAY, ALAN 642 NALLE GRADE RD NORTH FORT MYERS, FL 33917				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR STONE, HILARY 20150 HASKINS ROAD NORTH FORT MYERS, FL 33917				
12. I hereby certify that the information supplied with this filling 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.

MAK