

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 18, 2008 8:00 am**  
**Secretary of State**

02-18-2008 90006 035 \*\*\*\*61.25

**DOCUMENT # 728349**

1. Entity Name

**YOUNG ISRAEL OF HOLLYWOOD-FORT LAUDERDALE, INC.**



Principal Place of Business

**3291 STIRLING ROAD  
FT LAUDERDALE FL 33312**

Mailing Address

**3291 STIRLING ROAD  
FT LAUDERDALE FL 33312**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-1665301**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/07)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HOMNICK, REVA  
% YOUNG ISRAEL OF HOLLYWOOD  
3291 STIRLING ROAD  
FORT LAUDERDALE FL 33312**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

*Reva Homnick, Administrator 2-4-08*

Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

**Due By: May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to:  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **CLEMENTS, STEPHEN A**  
STREET ADDRESS **3291 STIRLING RD**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

TITLE **P** ☒ Delete  
NAME **DANIS, STEPHEN**  
STREET ADDRESS **3291 STIRLING RD.**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE **VP** ☐ Delete  
NAME **SPLAVER, ADAM DR**  
STREET ADDRESS **3291 STIRLING RD**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

TITLE **VP** ☐ Delete  
NAME **KIMMEL, STEVEN**  
STREET ADDRESS **3271 STRLING ROAD**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

TITLE **S** ☒ Delete  
NAME **GENET, DAVID**  
STREET ADDRESS **3291 STIRLING RD**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Immed. Past President** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **President** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **Treasurer** ☒ Change ☒ Addition  
NAME **Michael Baratz**  
STREET ADDRESS **3291 Stirling Rd**  
CITY-ST-ZIP **Fr. Lauderdale, FL 33312**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

*Reva Homnick*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-4-08 954-966-7377**

Date

Daytime Phone #