

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730118

FILED  
Apr 23, 2008  
Secretary of State

**Entity Name:** GULF COAST JEWISH FAMILY SERVICES, INC.

**Current Principal Place of Business:**

14041 ICOT BOULEVARD  
CLEARWATER, FL 33760 US

**New Principal Place of Business:**

**Current Mailing Address:**

14041 ICOT BOULEVARD  
CLEARWATER, FL 33760 US

**New Mailing Address:**

**FEI Number:** 59-1229354

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BERNSTEIN, MICHAEL  
14041 ICOT BOULEVARD  
CLEARWATER, FL 33760 US

**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: CD ( ) Delete  
Name: ABELSON, DAVID  
Address: 26301 US 19 NORTH  
City-St-Zip: CLEARWATER, FL 33761

Title: TD ( ) Delete  
Name: MENSCH, MYRON  
Address: 111 2ND AVE NE  
City-St-Zip: ST. PETERSBURG, FL

Title: SD ( ) Delete  
Name: SCHUTZ, GLADYS  
Address: 1847 SHORE DR.S.# 301  
City-St-Zip: S. PASEDNA, FL 33707

Title: DVC ( ) Delete  
Name: STERENSIS, BARBARA  
Address: 8912 LAUREL DRIVE  
City-St-Zip: PINELLAS PARK, FL 33782

Title: VCD ( ) Delete  
Name: KLEIN, GARY  
Address: 1575 CURLE W RD  
City-St-Zip: PALM HARBOR, FL 34683

Title: PCEO ( ) Delete  
Name: BERNSTEIN, MICHAEL  
Address: 14041 ICOT BOULEVARD  
City-St-Zip: CLEARWATER, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: MILLER, JAY  
Address: 405 CENTRAL AVE., SUITE 100  
City-St-Zip: ST. PETERSBURG, FL 33701

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL BERNSTEIN

P

04/23/2008

Electronic Signature of Signing Officer or Director

Date