

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # 730573

1. Entity Name
**THE UNITED JEWISH COMMUNITY OF BROWARD
COUNTY, INC.**



Principal Place of Business
**5890 S PINE ISLAND ROAD
DAVIE, FL 33328 US**

Mailing Address
**5890 S PINE ISLAND ROAD
DAVIE, FL 33328 US**



02202006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-0967823

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**WEINBAUM, MARTIN
5890 SOUTH PINE ISLAND ROAD
DAVIE, FL 33328**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	VC
NAME	MASAREK, MICHAEL
STREET ADDRESS	7510 BRIGANTINE LANE
CITY- ST- ZIP	PARKLAND, FL 33067
TITLE	VC
NAME	POLISH, SHELDON
STREET ADDRESS	621 PEBBLE CREEK TER
CITY- ST- ZIP	PLANTATION, FL 33324
TITLE	T
NAME	WEINBAUM, MARTIN P
STREET ADDRESS	12330 NW 77TH MANOR
CITY- ST- ZIP	PARKLAND, FL 33076
TITLE	PD
NAME	LEVY, ALAN J
STREET ADDRESS	75 ROYAL PALM DRIVE
CITY- ST- ZIP	FORT LAUDERDALE, FL 333011408
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

110000447837
03/08/06-20073-001 \$1.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 or other like empowered.

SIGNATURE:

Martin P. Weinbaum
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Martin P. Weinbaum

2/20/06

954-252-6900

Date

Daytime Phone #