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Apr 22 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. North Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **734392** (4)

1. Corporation Name

SUNRISE JEWISH CENTER, INC.

Principal Place of Business

**4099 PINE ISLAND ROAD
SUNRISE FL 33351-2314**

Mailing Address

**4099 PINE ISLAND ROAD
SUNRISE FL 33351-6579**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**MARTIN, LIPNACK
6827 W. COMMERCIAL BLVD.
FT. LAUDERDALE FL 33319**

3. Date Incorporated or Qualified
11/18/1975

3a. Date of Last Report
03/26/1996

4. FEI Number
59-1619338

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

1. Name

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

3.

4. City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	FLETCHER, BRUCE	
STREET ADDRESS	1985 NW 112 AVENUE	
CITY-ST-ZIP	CORAL SPRINGS FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	MISHKIN, LARRY	
STREET ADDRESS	7650 WEST MCNAB ROAD	
CITY-ST-ZIP	TAMARAC FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	WEISS, JULIUS	
STREET ADDRESS	8135 SUNRISE LAKES BLVD	
CITY-ST-ZIP	SUNRISE, FL 00000	
TITLE	FS	<input type="checkbox"/> DELETE
NAME	ORT, IRVING	
STREET ADDRESS	8280 SUNRISE LAKES BLVD.	
CITY-ST-ZIP	SUNRISE, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MANDEL, SYDNEY	
STREET ADDRESS	9350 SUNRISE LAKE BLVD.	
CITY-ST-ZIP	SUNRISE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	NIEPORENT, MAX	
STREET ADDRESS	9580 SUNRISE LAKES BLVD	
CITY-ST-ZIP	SUNRISE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

Date **4/10/97**

Daytime Phone # **741-0498**

CR2E037 (9/96)