

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749351

FILED
Apr 28, 2009
Secretary of State

Entity Name: HOLOCAUST DOCUMENTATION AND EDUCATION CENTER, INC.

Current Principal Place of Business:

2031 HARRISON STREET
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

2031 HARRISON STREET
HOLLYWOOD, FL 33020 US

New Mailing Address:

FEI Number: 59-1992826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENIGSBERG, ROSITTA E
2031 HARRISON STREET
HOLLYWOOD, FL 33020 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: VPD () Delete
Name: HOFRICHTER, RITA
Address: 251-174TH ST., #1819
City-St-Zip: N. MIAMI BEACH, FL 33160 US

Title: V () Delete
Name: EDELSBERG, SUSAN
Address: 401 ALAMANDA DRIVE
City-St-Zip: HALLANDALE, FL 33009 US

Title: EVPD () Delete
Name: KENIGSBERG, ROSITTA
Address: 520 HOLIDAY DRIVE
City-St-Zip: HALLANDALE, FL 33009 US

Title: PD () Delete
Name: LEVY, HARRY A
Address: 6400 CONGRESS AVE #STE 2000
City-St-Zip: BOCA RATON, FL 33487 US

Title: T () Delete
Name: SYLIVA, ZIFFER
Address: 2365 NE 199TH ST.
City-St-Zip: MIAMI, FL 33180 US

Title: V () Delete
Name: KATZ, ELLIE
Address: 5633 LIVE OAK TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33312 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: PD (X) Change () Addition
Name: LEVY, HARRY A
Address: 19500 TURNBERRY WAY #PH-AB
City-St-Zip: AVENTURA, FL 33180 US

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: ROSITTA E. KENIGSBERG

Electronic Signature of Signing Officer or Director

EXVP

04/28/2009

_____ Date