FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

YOUNG ISRAEL OF DEERFIELD BEACH, INC.

Principal Place of Business Mailing Address 1880 H WEST HILLSBORO BLVD. 1880 H WEST HILLSBORO BLVD. **DEERFIELD BEACH FL 33442** DEERFIELD BEACH FL 33442 3. Date incorporated or Qualified 05/13/1980 3a. Date of Last Repo-04/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2020923 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 24 29 30 Florida Statutes Yes No 25 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Bernard Itzkowitz COHEN, SIDNEY H Street Address (P.O. Box Number is Not Acceptable)
1016 WESTBURY "F" C.V.E 82 **4015 UPMINSTER K** 83 **DEERFIELD BEACH FL 33442** DEERFIELD BEACH 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. - Treas 2-10-97 Bernerd Ttoken hard title of applicable the first of the stand title of applicable to the standard title of applicable title of ap OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE **E** DELETE 1.1 TITLE Change Addition FEINBERG, SIDNEY 1.2 NAME NAME SCHLESSEL. STANLEY STREET ADDRESS 47 ASHBY A 1.3 STREET ADDRESS 30 ASHBY A DEERFIELD FL. 334 **DEERFIELD BEACH FL 33442** 1.4 CITY-ST-20P BEACH CITY-ST-ZIP VPD DELETE Change TITLE 21 TITLE FRANKEL, MEL FORGOSH, MORTON 2.2 NAME NAME 136 UPMINSTER "F" STREET ADDRESS 3001 LAMBRIDGE A 2.3 STREET ADDRESS DEERFIELD BEACH FLA. 33442 **DEERFIELD BEACH FL 33442** CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE K Change Addition TITLE 3.1 TITLE WECHSIER SOL NAME SCHWARTZ, BERNARD 3.2 NAME 2026 UPMINSTER K STREET ADDRESS 3.3 STREET ADDRESS DEERFIELD BEACH FLA 33442 **DEERFIELD BEACH FL 33442** CITY-ST-ZIP 3.4. CITY - ST - ZIP X DELETE Change Addition TITLE 4.1 TITLE COHEN, SIDNEY H ITZKOWITZ, BERNARD NAME 4.2 NAME 4015 UPMINSTER K. 4.3 STREET ADDRESS 1016 WESTBURY "F" STREET ADDRESS DEERFIELD BEACH **DEERFIELD BEACH FL 33448** CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition FSD TITLE FSD 5.1 TITLE MENETSKI, ABE NAME 5.2 NAME FRANKEL, DAVID 3028 UPMINSTER K 5.3 STREET ADDRESS STREET ADDRESS 205 WESTBURY "K" DEERFIELD BEACH

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

I do nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Forida Statutes. 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.

6.1 TITLE

6.2 NAME

SD *** ...

COHEN, SADIE

49 ASHBY "A"

SIGNATURE: ___

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

DEERFIELD BEACH FL 33442

DEERFIELD BEACH FL 33442

ZIGELMAN, HAROLD

201 RICHMOND A

MIGNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAM

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(5)

DELETE

*(J*2-10-97

33442

Change _ _ Addition

FILED

Feb 19 1997 8:00am

Secretary of State