

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752445

1. Entity Name

YOUNG ISRAEL OF DEERFIELD BEACH, INC.

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90051 036 ****61.25

Principal Place of Business

Mailing Address

1880 H WEST HILLSBORO BLVD.
 DEERFIELD BEACH FL 33442

1880 H WEST HILLSBORO BLVD.
 DEERFIELD BEACH FL 33442-1421

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2020923

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COHEN, SIDNEY
 4015 UPMINSTER K
 DEERFIELD BEACH FL 33442

Name

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

City

FL

Zip Code

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.

SIGNATURE

David L. Frankel

DAVID L. FRANKEL

4-18-2000

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	ADAMS, JEROME	
STREET ADDRESS	1063 BERKSHIRE D	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	APPLEBAUM, JULIUS	
STREET ADDRESS	146 UPMINSTER, #G	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	WECHSIER, SOL	
STREET ADDRESS	140 UPMINSTER "F"	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	ITZKOWITZ, BERNARD	
STREET ADDRESS	1016 WESTBURY "F"	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE	FSD	<input type="checkbox"/> Delete
NAME	FREDMAN, LOUIS	
STREET ADDRESS	97 WESTBURY E	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	PERLYSKY, MARLENE	
STREET ADDRESS	256 RICHMOND F	
CITY-ST-ZIP	DEERFIELD BEACH FL	

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COHEN, SIDNEY	
STREET ADDRESS	4015 UPMINSTER "K"	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADAMS, JEROME	
STREET ADDRESS	1063 BERKSHIRE "D"	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I 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 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 all other like empowered.

SIGNATURE:

David L. Frankel
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/2000
 Date

(954) 421-1367
 Daytime Phone #

CR2E037 (9/99)