2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #756975

1. Entity Name

JEWISH COMMUNITY CENTERS OF SOUTH BROWARD, INC.

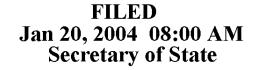
Principal Place of Business

5850 S PINE ISLAND RD

DAVIE, FL 33328

Mailing Address

5850 S PINE ISLAND RD DAVIE, FL 33328





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01092004 No Chg-NP DO NOT WRITE IN THIS SPACE

CR2E037 (10/03)

4. FEI Number 59-2075982	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional

8. Name and Address of Current Registered Agent

WILEN, BARRY

DO NOT WRITE

4601 SHERIDAN ST STE 208 HOLLYWOOD, FL 33021		IN THIS SPACE			
	e named entity submits this statement for the pations of registered agent.	surpose of changing its registered	d office or a	egistered agent, or bot	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signeture, typed or punited name of registered agent and title	if applicable (NOTE, Registered.	Agent signatur	a required when reinstalling)	DATE
	Filing Fee is \$61.25 Due by May 1, 2004	Election Campaign Financ Trust Fund Contribution.	oni:	\$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE TITLE NAME STREET ADDRESS CITY-SY-ZIP	FORT LAUDERDALE, FL 33331 SD KASS, SUSAN 311711 N. ISLAND RD. COOPER CITY, FL 33026 VPD KONHAUZER, CRAIG 3704 STARBOARD AVE HOLLYWOOD, FL 33026 TD FELDMAN, BERNIE	TORS -			000000007614 01/20/04-80031-006 61.25 NOT WRITE THIS SPACE
NAME STREET ACCRESS CITY-ST-ZIP	SUSKIND, LAURIE				
TITLE NAME STREET ADDRESS CITY-ST-21P	HOLLYWOOD, FL 33021				
12. I hereby	y certify that the information supplied with this f	iling does not qualify for the exen	nption state	ed in Section 119.07(3)	(i), Florida Statutes. I further certify that the information ct as if made under oath; that I am an officer or director

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 attachmant with an address, with all other like empowered.

Daytime Physic #