

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757064

FILED  
Mar 21, 2005  
Secretary of State

**Entity Name:** KEYS JEWISH COMMUNITY CENTER, INC.

**Current Principal Place of Business:**

93500 OVERSEAS HWY.  
TAVERNIER, FL 330702815

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1332  
TAVERNIER, FL 330702815

**New Mailing Address:**

**FEI Number:** 59-2427941

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

POLLACK, JOEL  
107 LONG BEN DRIVE  
KEY LARGO, FL 33037 US

**Name and Address of New Registered Agent:**

SCHOCKET, JEFFREY  
208 BUTTONWOOD LANE  
ISLAMORADA, FL 33036 US

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: JEFFREY SCHOCKET

03/21/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: GRAHAM, MARTIN  
Address: 609 N JADE DRIVE  
City-St-Zip: KEY LARGO, FL 33037

Title: P ( ) Delete  
Name: POLLACK, JOEL  
Address: 107 LONG BEN DRIVE  
City-St-Zip: KEY LARGO, FL 33037

Title: S ( ) Delete  
Name: POLLACK, LINDA  
Address: 107 LONG BEN DRIVE  
City-St-Zip: KEY KARGO, FL 33037

Title: D ( ) Delete  
Name: KLUGER, KURT  
Address: 163 INDIAN MOUND TRAIL  
City-St-Zip: TAVERNIER, FL 33070

Title: VD ( ) Delete  
Name: BETH, ALAN  
Address: 586 BONITO AVE  
City-St-Zip: KEY LARGO, FL 33037

Title: D ( ) Delete  
Name: RAKOV, NEIL  
Address: 177 INDIAN MOUND TRAIL  
City-St-Zip: TAVERNIER, FL 33070

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: SCHOCKET, JEFFREY  
Address: 208 BUTTONWOOD LANE  
City-St-Zip: ISLAMORADA, FL 33036

Title: T (X) Change ( ) Addition  
Name: POLLACK, LINDA  
Address: 107 LONG BEN DRIVE  
City-St-Zip: KEY KARGO, FL 33037

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: BETH, ALAN  
Address: 33 N. BLACKWATER LANE  
City-St-Zip: KEY LARGO, FL 33037

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LINDA POLLACK

T

03/21/2005

Electronic Signature of Signing Officer or Director

Date