2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an atta

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED DOCUMENT # 765838 Apr 13, 2000 8:00 am Secretary of State 1. Entity Name GLADES JEWISH COMMUNITY CENTER 04-13-2000 90070 026 ****61.25 Principal Place of Business Mailing Address 2885 DUQUESNE CIR 224 N.W. AVE G BELLE GLADE FL 33430 WEST PALM BCH FL 33409-7208 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 05-0053202 Not Applicable Zip _Country:: \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) NAGLER, ARTHUR B. 2885 DUQUESNE CIRCLE WEST PALM BCH FL 33409 Zip Code City FI 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution \Box Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11, ☐ Change Addition PD TITLE TITLE Delete NAGLER, ARTHUR B. NAME NAME STREET ADDRESS 397 NORTH JUNIPER AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PAHOKEE FL ☐ Change Addition ☐ Delete TITLE TITLE ARONS, EDWARD NAME NAME STREET ADDRESS 224-NW AVENUE-G STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BELLE GLADE FL Change Addition **Delete** TITLE TITLE. NACHMAN, NATALEAH NAME NAME STREET ADDRESS 224 NW AVENUE G STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP BELLE GLADE FL TITLE Change ☐ Addition ☐ Delete TITLE NAGLER, NOLA NAME NAME STREET ADDRESS STREET ADDRESS 224 NW AVENUE G CITY-ST-ZIP CITY-ST-ZIP **BELLE GLADE FL Change** ☐ Addition TITLE Delete NACHMAN, IZ NAME NAME rbsec STREET ADDRESS STREET ADDRESS 224 NW AVENUE G CITY-ST-ZIP CITY-ST-ZIP **BELLE GLADE FL** Delete Change ☐ Addition TITLE TITLE 17 SOOTH US HUY MULBERG, VICTOR NAME STREET ADDRESS STREET ADDRESS 224 NW AVENUE G CITY-ST-ZIP **BELLE GLADE FL** I further certify that the information 12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07 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

Daytime Phone (