2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#765838

FILED Apr 14, 2009 Secretary of State

Entity Name: GLADES JEWISH COMMUNITY CENTER

Current Principal Place of Business: New Principal Place of Business:

149 SE AVENUE 228 ANNONA AVENUE SUITE D PAHOKEE, FL 33476 US

BELLE GLADE, FL 33430 US

Current Mailing Address: New Mailing Address:

2885 DUQUESNE CIR

WEST PALM BCH, FL 33409 US

FEI Number: 05-0053202 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

NAGLER, ARTHUR B.

2885 DUQUESNE CIRCLE
WEST PALM BCH, FL 33409 US

NAGLER, ARTHUR B
2885 DUQUESNE CIRCLE
WEST PALM BCH, FL 33409 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: ARTHUR B. NAGLER 04/14/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition
Name: NAGLER ARTHUR B

 Name:
 NAGLER, ARTHUR B.
 Name:
 NAGLER, ARTHUR B.

 Address:
 2885 DUQUESNE CIRCLE
 Address:
 2885 DUQUESNE CIRCLE

 City-St-Zip:
 WEST PALM BEACH, FL 33409
 City-St-Zip:
 WEST PALM BEACH, FL 33409

 Name:
 ARONS, EDWARD
 Name:

 Address:
 228 ANNONA AVENUE
 Address:

 City-St-Zip:
 PAHOKEE, FL 33476
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 ARONS, RAQUEL
 Name:

 Address:
 228 ANNONA AVENUE
 Address:

 City-St-Zip:
 PAHOKEE, FL 33476
 City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition

Name:NAGLER, NOLAName:NAGLER, NOLAAddress:2885 DUQUESNE CIRCLEAddress:2885 DUQUESNE CIRCLECity-St-Zip:WEST PALM BEACH, FL 33409City-St-Zip:WEST PALM BEACH, FL 33409

Name: MULBERG, NISHA Name: MULBERG, NISHA

Address: 400 S. FLORIDA AVE., APT. 705 Address: 400 S. FLORIDA AVE., APT. 705

City-St-Zip: LAKELAND, FL 33437 City-St-Zip: LAKELAND, FL 33801

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ARTHUR B. NAGLER P 04/14/2009