

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90045 015 ****70.00

DOCUMENT # 767396

1. Entity Name

SOUTH BROWARD JEWISH FEDERATION HOUSING, INC.

Principal Place of Business

Mailing Address

**3081 TAFT ST
HOLLYWOOD FL 33021
US**

**3081 TAFT ST
HOLLYWOOD FL 33021
US**

2. Principal Place of Business
3081 Taft Street

3. Mailing Address
3081 Taft Street

Suite, Apt. #, etc.
Hollywood

Suite, Apt. #, etc.
Hollywood

City & State
Florida

City & State
Florida

Zip
33021

Country
Broward

Zip
33021

Country
Broward

4. FEI Number
59-2306562

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required.**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RUBIN, DR G
3081 TAFT ST
HOLLYWOOD FL 33021**

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

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
SCHULMAN, DAVID B
9513 SEA TURTLE DR
PLANTATION FL 33324** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
Alter, Barry R. M.D.
3312 S.W. 57 Place
Ft. Lauderdale, FL 33312** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
KASSOWER, JEFFREY
10315 NW 3RD PLACE
CORAL SPRINGS FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
TELLES, SELMA
6618 RACQUET CLUB DR.
LAUDERHILL FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
SPATZ, GAIL
3830 N. 31ST TERR.
HOLLYWOOD FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
Tabatchnick, Drew
12101 N.W. 7 St.
Plantation, FL 33325** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
RUBIN, DR. GARY
90 JUNIPER ROAD
HOLLYWOOD FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
SCHWARTZ, JOSEPH L
PO BOX 7259
HOLLYWOOD FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
Berzofsky, Caryl
5101 West Park Rd.
Hollywood, FL 33021** ☒ Change ☐ Addition

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/01

954-748-8400

Date

Daytime Phone #

CR2E037 (10/00)