2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # 767396 02-09-2005 90043 020 ****70.00 SOUTH BROWARD JEWISH FEDERATION HOUSING, Principal Place of Business Mailing Address **3081 TAFT ST 3081 TAFT ST** HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-2306562 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Δĺ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Wein baum, Martin P. SIEPSEN, GARY Street Address (P.O. Box Number is Not Acceptable) **3081 TAFT ST** HOLLYWOOD, FL 33021 3081 Tuft St CIN Hollywood Zip Code 8. The above named entity surmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) 9. Election Campeign Financing \$5.00 May Be Make check payable to Trust Fund Contribution Added to Fees Florida Department of State Filing Fee to \$61,25 Due by May 1,2005 OFFICERS AND DIRECTORS 1100 Marie 1420 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE, THE PARTY OF THE P PD Tage 17 12 19 19 TITLE DECKELBAUM, GORDON NAME NAME STREET ADDRESS 6051 N. OCEAN D, PENTHOUSE 5 STREET ADORESS HOLLYWOOD, FL 33019 CITY-ST-7/P CITY-ST-7IP TITLE ☐ Change ☐ Delete TITLE ☐ Addition NAME WEINBAUM, MARTIN P STREET ADDRESS 3081-TAFT ST STREET ADORESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP TD Delete ☐ Change ☐ Addition TITLE LEVY, ALAN NAME NAME 75 ROYAL PALM DR STREET ADDRESS STREET ADDRESS FORT LAUDERDALE, FL 33301 CITY-ST-7/P CITY-ST-ZP ☐ Delete TITLE TITLE ☐ Change ☐ Addition MAME TABATCHNICK, DREW NAME STREET ADORESS 12101 NW 7 STREET STREET ADDRESS PLANTATION, FL 33325 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS C/TY-ST-7/P CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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. Wein baum **SIGNATURE:**

OFFICER OF DIRECTOR

FILED

Feb 09, 2005 8:00 am