

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005727

FILED
Jun 22, 2009
Secretary of State

Entity Name: OHEL CHILDREN'S HOME AND FAMILY SERVICES, INC.

Current Principal Place of Business:

4510 16TH AVENUE
BROOKLYN, NY 11204

New Principal Place of Business:

Current Mailing Address:

4510 16TH AVENUE
BROOKLYN, NY 11204

New Mailing Address:

FEI Number: 11-6078704 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SIMONS SMITH, JILL
4233 SHERIDAN AVENUE
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

ASH, TOBY
4233 SHERIDAN AVENUE
MIAMI BEACH, FL 33140 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: TOBY ASH

06/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BERTRAM, MOSHE
Address: 3401 TREMLEY POINT RD.
City-St-Zip: LINDEN, NJ 07036

Title: D () Delete
Name: BIBERFELD, MARCEL DR
Address: 920 48TH STREET
City-St-Zip: BROOKLYN, NY 11219

Title: D () Delete
Name: PICKER, BARRY
Address: 1406 AVE. X
City-St-Zip: BROOKLYN, NY 11235

Title: D () Delete
Name: PORT, YALE DR
Address: 2022 AVE M
City-St-Zip: BROOKLYN, NY 11210

Title: D () Delete
Name: BORENSTEIN, SID
Address: 1246 EAST 10TH STREET
City-St-Zip: BROOKLYN, NY 11230

Title: D () Delete
Name: BUNIM, MARK ESQ
Address: 1290 AVE. OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: DAVID MANDEL

CEO

06/22/2009

Electronic Signature of Signing Officer or Director

Date