

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# F07000006210

Entity Name: AMERICAN COUNCIL FOR JUDAISM, INC.

Current Principal Place of Business:

845 BAYTREE LANE
PONTE VERDA BEACH, FL 320824164

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2836
PONTE VERDA BEACH, FL 320042836

New Mailing Address:

FEI Number: 13-1632505 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAMAN, STEPHEN L
845 BAYTREE LN
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NAMAN, STEPHEN L
Address: 845 BAYTREE LN
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP () Delete
Name: HYTKEN, FRANK H
Address: PO BOX 794055
City-St-Zip: DALLAS, TX 75379

Title: D () Delete
Name: STEINER, ROBERT L
Address: 3112 Q STREET NW
City-St-Zip: WASHINGTON, DC 20007

Title: T () Delete
Name: GROPMAN, ALAN L
Address: 6015 KERRWOOD STREET
City-St-Zip: BURKE, VA 22015

Title: S () Delete
Name: NAMAN, ROBERT D
Address: 1800 GLEN ROAD
City-St-Zip: KERRVILLE, TX 78028

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
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: STEPHEN L. NAMAN

P

04/14/2009

Electronic Signature of Signing Officer or Director

_____ Date