

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003408

FILED
Mar 20, 2009
Secretary of State

Entity Name: THE DORA TEITELBOIM CENTER FOR YIDDISH CULTURE, INC.

Current Principal Place of Business:

200 TRANQUILITY PLACE
HENDERSONVILLE, NC 28739

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1066
FLAT ROCK, NC 28731

New Mailing Address:

FEI Number: 11-3121931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDREW YAGODA, PA
2222 PONCE DE LEON BLVD.
SUITE 500
CORAL GABLES, FL 33134 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: D () Delete
Name: WEINTRAUB, LEONORA
Address: 1038 LINDEN STREET
City-St-Zip: VALLEY STREAM, NY 11580

Title: D () Delete
Name: ROBB, EVELYN
Address: 1038 LINDEN STREET
City-St-Zip: VALLEY STREAM, NY 11580

Title: D () Delete
Name: WEINTRAUB, ELIZABETH
Address: PO BOX 1066
City-St-Zip: FLAT ROCK, NC 28731

Title: D () Delete
Name: WEINTRAUB, BERNARD
Address: 1038 LINDEN STREET
City-St-Zip: VALLEY STREAM, NY 11580

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:

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 WEINTRAUB

ED

03/20/2009

Electronic Signature of Signing Officer or Director

Date