2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002167

Mar 01, 2011 Secretary of State

Entity Name: THE ROSE AND JACK ORLOFF CENTRAL AGENCY FOR JEWISH EDUCATION OF BROWARD COUNTY,

INC

Current Principal Place of Business: New Principal Place of Business:

5890 SOUTH PINE ISLAND ROAD

DAVIE, FL 33328

Current Mailing Address: New Mailing Address:

5890 SOUTH PINE ISLAND ROAD DAVIE, FL 33328

FEI Number: 03-0429765 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COHN, ALAN B ESQ 100 WEST CYPRESS CREEK ROAD SUITE 700 FT. LAUDERDALE, FL 33309 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: DRUSS, WANDY

Address: 5890 S. PINE ISLAND ROAD

City-St-Zip: DAVIE, FL 33328

Title: VP

Name: GREENBERG, BRUCE

Address: 5890 SOUTH PINE ISLAND ROAD

City-St-Zip: DAVIE, FL 33328

Title: S

Name: WIENER, JUDY

Address: 5890 SOUTH PINE ISLAND ROAD

City-St-Zip: DAVIE, FL 33328

Title: T

Name: BERZOFSKY, SEYMOUR

Address: 5890 SOUTH PINE ISLAND ROAD

City-St-Zip: DAVIE, FL 33328

Title: VP

Name: FELDMAN, CRAIG

Address: 5890 SOUTH PINE ISLAND ROAD

City-St-Zip: DAVIE, FL 33328

Title: VP

Name: BLATTNER, ANNE

Address: 5890 SOUTH PINE ISLAND ROAD

City-St-Zip: DAVIE, FL 33328

I hereby 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 all other like empowered.

SIGNATURE: WANDY DRUSS P 03/01/2011