

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005856

FILED
Jul 22, 2004
Secretary of State**Entity Name:** KEY WEST HEBREW SCHOOL, INC.**Current Principal Place of Business:**PO BOX 1514
KEY WEST, FL 33041**New Principal Place of Business:**750 UNITED STREET
KEY WEST, FL 33040**Current Mailing Address:**PO BOX 1514
KEY WEST, FL 33041**New Mailing Address:**750 UNITED STREET
KEY WEST, FL 33040**FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**COVAN, DIANE T
600 WHITEHEAD ST STE 205
KEY WEST, FL 33040 US**Name and Address of New Registered Agent:**COVAN, DIANE T
1901 FOGARTY AVENUE
1
KEY WEST, FL 33040 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: DIANE TOLBERT COVAN

07/22/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: DP () Delete
Name: ZUCKER, JACOB
Address: 321 GRINNELL ST
City-St-Zip: KEY WEST, FL 33040Title: DV () Delete
Name: ZUCKER, CHANA
Address: 321 GRINNELL ST
City-St-Zip: KEY WEST, FL 33040Title: DT () Delete
Name: KREINCES, JOHN
Address: 181 KEY HAVEN RD
City-St-Zip: KEY WEST, FL 33040Title: DS () Delete
Name: BUCHLER, TOM
Address: 1415 ALBERTA ST
City-St-Zip: KEY WEST, FL 33040Title: D () Delete
Name: COVAN, DIANE
Address: 600 WHITEHEAD ST
City-St-Zip: KEY WEST, FL 33040Title: D () Delete
Name: ZAHAV, JONATHAN
Address: 621 GRINNELL ST
City-St-Zip: KEY WEST, FL 33040**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: D (X) Change () Addition
Name: COVAN, DIANE
Address: 1901 FOGARTY AVENUE WUITE 1
City-St-Zip: KEY WEST, FL 33040Title: D (X) Change () Addition
Name: FINMAN, YISROEL
Address: 750 UNITED STREET
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DIANE TOLBERT COVAN

D

07/22/2004

Electronic Signature of Signing Officer or Director

Date