

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 MAR 10 PM 2:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N02774

1. Corporation Name  
FLORIDA STATE B'NAI B'RITH SENIOR CITIZENS HOUSING CORPORATION, INC.

Principal Place of Business: 299 SW 3RD AVE, DEERFIELD BEACH FL 33441  
Mailing Address: 299 SW 3RD AVE, DEERFIELD BEACH FL 33441



21	2. Principal Place of Business	2a	Mailing Address	3	Date Incorporated or Qualified	4	FEI Number	Applied For
	Suite, Apt. #, etc.		Suite, Apt. #, etc.		04/26/1984		59-2412944	Not Applicable
22	City & State	27	City & State	5	Certificate of Status Desired			\$8.75 Additional Fee Required
23	Zip	28	Zip	6	Election Campaign Financing Trust Fund Contribution			\$5.00 May Be Added to Fees
24	Country	29	Country	9. Name and Address of Current Registered Agent				

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
HAHAMOVITCH, DONALD 7770 WEST OAKLAND PARK BLVD SUITE 470 FT. LAUDERDALE FL 33351		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAHAMOVITCH, DONALD E.	1.2 NAME	
STREET ADDRESS	7770 W OAKLAND PARK BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	SUNRISE FL	1.4 CITY-ST-ZIP	300002810909-9
TITLE	P	2.1 TITLE	VP
NAME	KONIGSBURG, LEONARD	2.2 NAME	03/18/99-01994-009
STREET ADDRESS	1000 S. FEDERAL HWY #200	2.3 STREET ADDRESS	****\$61.25 ****\$61.25
CITY-ST-ZIP	DEERFIELD BEACH FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWEBEL, ARTHUR	3.2 NAME	
STREET ADDRESS	5231 SW 18TH ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FENTIN, ARTHUR	4.2 NAME	Arthur Fentin
STREET ADDRESS	9831 HARBOR LAKES CIRCLE	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KINKER, LEONARD	5.2 NAME	
STREET ADDRESS	4710 NE 26 AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	5.4 CITY-ST-ZIP	
TITLE	VP	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LITTMAN, PAUL	6.2 NAME	D
STREET ADDRESS	LYNHURST J-3039	6.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH. FL 33442	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_ DATE: 3/26/99 (954) 426-5579

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