


ERT

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

2006 OCT 16 PM 4:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02774					
1. Entity 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		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2412944	
Zip		Country		Applied For Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
KONIGSBURG, LEONARD 1975 SE 3RD STREET, #1102 DEERFIELD BEACH, FL 33441			Name <i>Arthur Fentin</i>		
			Street Address (P.O. Box Number is Not Acceptable)		
			<i>299 SW 3rd Ave</i>		
			City <i>Deerfield Beach</i>		FL Zip Code <i>33441</i>
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Arthur Fentin</i>			10/5/06		
Signature, typed or printed name of registered agent and title if applicable.			(NOTE: Registered Agent signature required when reinstating)		DATE
FILE NOW!!! FEE IS \$236.25 After January 1, 2007, Fee will be \$297.50			Make check payable to Florida Department of State		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HAHAMOVITCH, DONALD E. 109 OXFORD CIR. WILLIAMSBURG, VA 23185	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KONIGSBURG, LEONARD 1975 SE 3 rd STREET #102 DEERFIELD BEACH, FL 33441	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COFFINO, GLADYS 3005 PORTOFINO ISLE M3 COCONUT CREEK, FL 33086	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3003 PORTOFINO ISLE M-3	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FENTIN, ARTHUR 22612 ESPLANADA CIRCLE W BOCA RATON, FL 33433	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	000090880800 10/16/06--01051--007 **236.25	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KINKER, LEONARD 4710 NE 26 AVE FT. LAUDERDALE, FL 33308	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BUCHSBAUM, PHYLLIS 10654 BEACH PALM COURT BOYNTON BEACH, FL 33437	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WITTENBERG, ANNETTE 22612 ESPLANADA CIRCLE W BOCA RATON, FL 33433	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	FENTIN, ANNETTE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <i>Arthur Fentin</i>			10/5/06		1
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #



10042006 REIN-NP CR2E099 (11/05)

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