

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007277

FILED  
Jan 16, 2006  
Secretary of State

Entity Name: JEWISH CENTER OF CAPE CORAL, INC.

**Current Principal Place of Business:**

2122 WEST CAPE CORAL PARKWAY  
CAPE CORAL, FL 33914 US

**New Principal Place of Business:**

**Current Mailing Address:**

2122 WEST CAPE CORAL PARKWAY  
CAPE CORAL, FL 33914 US

**New Mailing Address:**

FEI Number: 20-1418429

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LABKOWSKI, JOSEPH  
2122 WEST CAPE CORAL PARKWAY  
CAPE CORAL, FL 33914 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: P ( ) Delete  
Name: LABOWSKI, JOSEPH  
Address: 2122 WEST CAPE CORAL PARKWAY  
City-St-Zip: CAPE CORAL, FL 33194 US

Title: VP ( ) Delete  
Name: LABKOWSKI, RIFCA  
Address: 2122 WEST CAPE CORAL PARKWAY  
City-St-Zip: CAPE CORAL PARKWAYS, FL 33194 US

Title: SECR ( ) Delete  
Name: STERN, LEAH  
Address: 2755 SARWELL AVE.  
City-St-Zip: CHICAGO, IL 60645 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LABKOWSKI, JOSEPH  
Address: 2122 WEST CAPE CORAL PARKWAY  
City-St-Zip: CAPE CORAL, FL 33194 US

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 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: JOSEPH LABKOWSKI

P

01/16/2006

Electronic Signature of Signing Officer or Director

Date