

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011760

Entity Name: CHABAD OF NOVA, INC.

FILED
Sep 06, 2006
Secretary of State

Current Principal Place of Business:

9841 NW 2ND STREET
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

9841 NW 2ND STREET
PLANTATION, FL 33324

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

POSNER, SHMUEL
9841 NW 2ND STREET
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

POSNER, SHMUEL
8672 BLAZE CT
DAVIE, FL 33328 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

09/06/2006

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ADLER, ANDREW J
Address: 9841 NW 2ND STREET
City-St-Zip: PLANTATION, FL 33324

Title: VP () Delete
Name: POSNER, SHMUEL
Address: 9841 NW 2ND STREET
City-St-Zip: PLANTATION, FL 33324

Title: VP () Delete
Name: POSNER, CHAYA G
Address: 9841 NW 2ND STREET
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POSNER, SHMUEL L
Address: 8672 BLAZE CT
City-St-Zip: DAVIE, FL 33328

Title: VP (X) Change () Addition
Name: POSNER, SHMUEL
Address: 8672 BLAZE CT
City-St-Zip: DAVIE, FL 33328

Title: VP (X) Change () Addition
Name: POSNER, CHAYA G
Address: 8672 BLAZE CT
City-St-Zip: DAVIE, FL 33328

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: SHMUEL POSNER

Electronic Signature of Signing Officer or Director

P

09/06/2006

Date