

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008783

FILED
Apr 17, 2009
Secretary of State

Entity Name: CHABAD STUDENT CENTER, INC.

Current Principal Place of Business:

935 NW 5TH AVE
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

935 NW 5TH AVE
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 20-3396643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIBEROW, BORUCH SHMUEL
935 NW 5TH AVE
BOCA RATON, FL 33432 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: D () Delete
Name: LIBEROW, BORUCH SHMUEL RABBI
Address: 935 NW 5TH AVE
City-St-Zip: BOCA RATON, FL 33432 US

Title: D () Delete
Name: LIBEROW, RIVKA ROCHELLE
Address: 935 NW 5TH AVE
City-St-Zip: BOCA RATON, FL 33432 US

Title: T () Delete
Name: FELLIG, YAKOV RABBI
Address: 935 NW 5TH AVE
City-St-Zip: BOCA RATON, FL 33432 US

Title: VP () Delete
Name: DENBURG, MOSHE RABBI
Address: 17950 MILITARY TRAIL
City-St-Zip: BOCA RATON, FL 33496

Title: VP () Delete
Name: BUKIET, ZALMAN RABBI
Address: 17950 MILITARY TRAIL
City-St-Zip: BOCA RATON, FL 33496

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: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BORUCH SHMUEL LIBEROW

DIR

04/17/2009

Electronic Signature of Signing Officer or Director

Date