

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002674

FILED
May 05, 2010
Secretary of State

Entity Name: CHABAD LUBAVITCH OF SOUTHSIDE, INC.

Current Principal Place of Business:

11271 ALUMNI WAY
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

11271 ALUMNI WAY
JACKSONVILLE, FL 32246

New Mailing Address:

FEI Number: 20-4836916 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

Name and Address of New Registered Agent:

NOVACK, SHMUEL
7883 CHASE MEADOWS DR E
JACKSONVILLE, FL 32256 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

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: NOVACK, CHANA
Address: 7883 CHASE MEADOWS DR E
City-St-Zip: JACKSONVILLE, FL 32256

Title: VD
Name: NOVACK, SHMUEL
Address: 7883 CHASE MEADOWS DR E
City-St-Zip: JACKSONVILLE, FL 32256

Title: SD
Name: GOLDSTEIN, FRED
Address: 7003 CATALONIA AVE.
City-St-Zip: JACKSONVILLE, FL 32217

Title: M
Name: KAUFMAN, JESSE
Address: 10129 HALEY RD
City-St-Zip: JACKSONVILLE, FL 32257

Title: M
Name: HILL, GALIT
Address: 4558 DEEP GROVE CT
City-St-Zip: JACKSONVILLE, FL 32246

I hereby 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 all other like empowered.

SIGNATURE: SN

VP

05/05/2010

Electronic Signature of Signing Officer or Director

Date