2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2008
Secretary of State

DOCUMENT# N07000001521

Entity Name: CHABAD CIRCLE OF FRIENDS, INC.

Current Principal Place of Business:

1500 NORTH STATE ROAD 7
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

1500 NORTH STATE ROAD 7
MARGATE, FL 33063

New Mailing Address:

FEI Number: 20-8585641 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SICKLES, BARRY M ESQ.
3300 UNIVERSITY DRIVE #712
CORAL SPRINGS, FL 33065 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: LICHY, MAX
Address: 1500 NORTH STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

Title: V ( ) Delete
Name: LICHY, ROAS
Address: 1500 NORTH STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: LICHY, ROSA
Address: 1500 NORTH STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

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: MAX LICHY P 01/04/2008

Electronic Signature of Signing Officer or Director — Date