

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004273

FILED
May 15, 2008
Secretary of State

Entity Name: JEWISH LEARNING CENTER OF SOUTH DADE, INC.

Current Principal Place of Business:

10970 SW 69TH AVENUE ROAD
MIAMI, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

10970 SW 69TH AVENUE ROAD
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 20-8995171 **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:

GORDON, LAWRENCE
10970 SW 69TH AVENUE ROAD
MIAMI, FL 33156 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: PSD () Delete
Name: GORDON, LAWRENCE
Address: 10970 SW 69TH AVENUE ROAD
City-St-Zip: MIAMI, FL 33156

Title: VPD () Delete
Name: KARL, ROBERT
Address: 6500 SW 114TH STREET
City-St-Zip: MIAMI, FL 33156

Title: SD () Delete
Name: MASIN, GREG
Address: 7020 SW 100TH STREET
City-St-Zip: MIAMI, FL 33156

Title: TD () Delete
Name: LEWIN, ALAN
Address: 6425 SW 110TH STREET
City-St-Zip: MIAMI, FL 33156

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:

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: LAWRENCE GORDON

PSD

05/15/2008

Electronic Signature of Signing Officer or Director

Date