
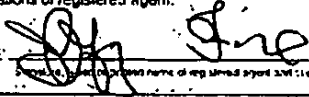
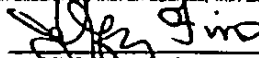


FILED
Jun 09, 2008 8:00 am
Secretary of State

02-26-2008 90011 039 ****70 00

| | | | |
|--|---------|---|---------|
| DOCUMENT # N07000005179 | |  | |
| 1. Entity Name JEWISH FAMILY INSTITUTE INC. | | 02-26-2008 90011 039 ****70.00 | |
| Principal Place of Business 5237 ABELIA DRIVE ORLANDO FL 32819 | | Mailing Address 5237 ABELIA DRIVE ORLANDO FL 32819 | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |
| 4. FET Number 11-273324 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent FINE, YEHUDA 5237 ABELIA DRIVE ORLANDO FL 32819 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  2/18/08 | | | |
| FILE NOW - FEE IS \$61.25 Due By May 1, 2008 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP DP FINE, JEFFREY Y. 5237 ABELIA DRIVE ORLANDO FL 32819 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP SP SAJONIAS, JOANNE 1001 VIA SANTAE 203 CELEBRATION FL 34747 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP <input checked="" type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition DORAH FINE 5237 ABELIA DRIVE Orlando, FL 32819 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | |
| SIGNATURE:  Jeffrey Y. Fine | | 2/18/07 407 292 0673 | |

Internal Revenue Service

ATTACHMENT

Department of the Treasury

District
Director

P.O. Box 1680, GPO Brooklyn, N.Y. 11202

Date: OCT 02 1985

66013788
#10700000579
The Jewish Family Institute, Inc.
1451 East 14th Street
Brooklyn, NY 11230

Employer Identification Number:
11-2733324
Accounting Period Ending:
December 31st
Foundation Status Classification:
509(a)(1)
Advance Ruling Period Ends:
December 31, 1986
Person to Contact:
R. Jones
Contact Telephone Number:
(718) 760-6138

Dear Taxpayer:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably be expected to be a publicly supported organization described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, you will be treated as a publicly supported organization, and not as a private foundation, during an advance ruling period. This advance ruling period begins on the date of your inception and ends on the date shown above.

Within 90 days after the end of your advance ruling period, you must submit to us information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, you will be classified as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, you will be classified as a private foundation for further periods. Also, if you are classified as a private foundation, you will be treated as a private foundation from the date of your inception for purposes of sections 507(d) and 4940.

Letter 1045(DO)(6-77)