

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Mar 31, 1999 8:00 am**  
**Secretary of State**

03-31-1999 90021 004 \*\*\*\*61.25

<b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

**DOCUMENT # N07749**

1. Corporation Name

**SOUTH POINT SECTION NATIONAL COUNCIL OF JEWISH WOMEN, INC.**

Principal Place of Business

7350 KINGHURST DR.  
#302 HUNTINGTON LAKES  
DELRAY BEACH FL 33446  
US

Mailing Address

7350 KINGHURST DR.  
#302 HUNTINGTON LAKES  
DELRAY BEACH FL 33446  
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 7310 Ashford Place		26 7310 Ashford Place		02/20/1985	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 #407 Huntington Lakes		27 #407 Huntington Lakes		59-2495167	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Delray Beach, FL.33446		28 Delray Beach, FL.33446		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip Country		Zip Country		Trust Fund Contribution	
24 33446 25 U.S.		29 33446 30 U.S.			

9. Name and Address of Current Registered Agent

**MILLER, BERNICE**  
7350 KINGHURST DR. #302  
HUNTINGTON LAKES  
DELRAY BEACH FL 33446

10. Name and Address of New Registered Agent

81 Name  
**Constance Sussman**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**7310 Ashford Place #407**  
83  
**Huntington Lakes**  
84 City  
**Delray Beach** **FL** 85 Zip Code  
**33446**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Constance Sussman Co-President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-15-99

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP <input checked="" type="checkbox"/> DELETE	1.1 TITLE	Co-President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MILLER, BERNICE	1.2 NAME	Constance Sussman
STREET ADDRESS	7350 KINGHURST DR. #302	1.3 STREET ADDRESS	7310 Ashford Place #407
CITY-ST-ZIP	DELRAY BCH. FL 33446	1.4 CITY-ST-ZIP	Delray Beach, FL.33446
TITLE	CP <input checked="" type="checkbox"/> DELETE	2.1 TITLE	CO-President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BASHOVER, BEATRICE	2.2 NAME	Estelle Bykofsky
STREET ADDRESS	3165 NW 6TH ST.	2.3 STREET ADDRESS	10177 Canoe Brook Circle
CITY-ST-ZIP	DELRAY BCH. FL 33446	2.4 CITY-ST-ZIP	Boca Raton, FL.33498
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NEWMAN, RUTH	3.2 NAME	
STREET ADDRESS	15075 WITNEY RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL	3.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	CO-President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPECTOR, NORMA	4.2 NAME	Norma Spector
STREET ADDRESS	1 ABBEY LANE #103	4.3 STREET ADDRESS	1 Abbey Lane #103
CITY-ST-ZIP	DELRAY BCH FL 33446	4.4 CITY-ST-ZIP	Delray Beach, FL. 33446
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHAPIRO, MURIEL	5.2 NAME	Phyllis Lapidese
STREET ADDRESS	15109 ASHLAND DR	5.3 STREET ADDRESS	14699 Hideaway Lake Lane
CITY-ST-ZIP	DELRAY BEACH FL 33484	5.4 CITY-ST-ZIP	Delray Beach, FL. 33484
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KOPAN, RHODA	6.2 NAME	Ann Stillman
STREET ADDRESS	14916 PEPPER MILL LANE	6.3 STREET ADDRESS	788 N.W.32nd Avenue
CITY-ST-ZIP	DELRAY BEACH FL 33484	6.4 CITY-ST-ZIP	Delray Beach, FL.33445

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Constance Sussman Co President

Date

Daytime Phone #

1-15-99 561-499-7958

CR2E037 (11/98)

NATIONAL  
COUNCIL  
OF JEWISH  
WOMEN

275581-90021-4  
N07749

**nojw**

NATIONAL COUNCIL OF JEWISH WOMEN  
EDUCATION SOCIAL ACTION SERVICE

SOUTH POINT SECTION

Page 2 NONPROFIT CORPORATION ANNUAL REPORT  
1999

Director  
Naomi Frankfort  
14897 Peppermill Lane  
Delray Beach, Fl.33484

Addition