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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N12840

1. Corporation Name

JEWISH COMMUNITY ALLIANCE, INC.

Principal Place of Business

8505 SAN JOSE BLVD.
 JACKSONVILLE FL 32217

Mailing Address

8505 SAN JOSE BLVD.
 JACKSONVILLE FL 32217



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		12/23/1985	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2620208	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip		Country		24	
25		29		30	
29		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

KORMAN, HOWARD I
4490 SOUTHSIDE BLVD
JACKSONVILLE FL 32216

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DONZIGER, MICHAEL	1.2 NAME	Irene Jaffa
STREET ADDRESS	8235 GARDEN VIEW COURT	1.3 STREET ADDRESS	2801 Sylvan Lane North
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	Jacksonville, FL 32257
TITLE	PD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	TD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KORMAN, HOWARD	2.2 NAME	Sherwin Burman
STREET ADDRESS	8635 VILLA SAN JOSE DRIVE EAST	2.3 STREET ADDRESS	2850 Spanish Cove Trail
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP	Jacksonville, FL 32257
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	
NAME	GOLDFIELD, IRA E	3.2 NAME	
STREET ADDRESS	2803 SCOTT MILL ESTATES	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32257	3.4 CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KOSSOFF, DINAH	4.2 NAME	Mel Gottlieb
STREET ADDRESS	9829 WOODROSE LANE	4.3 STREET ADDRESS	3028 Forest Circle
CITY-ST-ZIP	JACKSONVILLE FL	4.4 CITY-ST-ZIP	Jacksonville, FL 32257
TITLE	TD <input type="checkbox"/> DELETE	5.1 TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLDMAN, STEPHEN	5.2 NAME	
STREET ADDRESS	3482 BEAUCLERC COVE PLACE	5.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32257	5.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	6.1 TITLE	
NAME	KORN, PAMELA V.	6.2 NAME	
STREET ADDRESS	3603 CATHEDRAL OAKS PL N	6.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	6.4 CITY-ST-ZIP	

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:

Sherwin Burman
 Sherwin Burman
 Treasurer

2/17/99 (904) 730-2100

0005608

CR2E037 (11/98)