

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17008

FILED
Apr 26, 2007
Secretary of State

Entity Name: PALM BEACH JEWISH COMMUNITY CAMPUS CORPORATION

Current Principal Place of Business:

4601 COMMUNITY DRIVE
WEST PALM BEACH, FL 334172760

New Principal Place of Business:

Current Mailing Address:

4601 COMMUNITY DRIVE
WEST PALM BEACH, FL 334172760

New Mailing Address:

FEI Number: 65-0006250

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASCH, MICHELLE
4601 COMMUNITY DRIVE
WEST PALM BEACH, FL 334172760 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: PD () Delete
Name: LIST, MARTIN
Address: 2425 EMBASSY DR
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD () Delete
Name: LEVY, STACEY
Address: 15220 PALM WOOD RD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VD () Delete
Name: LEVY, MARK
Address: 15220 PALM WOOD RD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TD () Delete
Name: TOCHNER, MAX
Address: 885 FATHOM RD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VD () Delete
Name: LEVY, JUDITH A
Address: 9 VIA LOS INCAS
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: LEVY, STACEY
Address: 15220 PALM WOOD RD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VD (X) Change () Addition
Name: PETNOY, RON
Address: 829 HARBOUR ISLE PL
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TD (X) Change () Addition
Name: SIMON, ADELE
Address: 1883 INIAN RD
City-St-Zip: WEST PALM BEACH, FL 33406

Title: VD (X) Change () Addition
Name: KAUFMAN, ARLENE
Address: 219 EVERGLADES AVE
City-St-Zip: PALM BEACH, FL 33480

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: MARTIN A. LITS

PD

04/26/2007

Electronic Signature of Signing Officer or Director

Date