

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19523

FILED  
Feb 08, 2007  
Secretary of State

**Entity Name:** JEWISH HOME FOR THE AGED OF PALM BEACH COUNTY FOUNDATION, INC.

**Current Principal Place of Business:**

4847 FRED GLADSTONE DR.  
WEST PALM BEACH, FL 33417

**New Principal Place of Business:**

**Current Mailing Address:**

4847 FRED GLADSTONE DR.  
WEST PALM BEACH, FL 33417

**New Mailing Address:**

**FEI Number:** 59-2774476

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FUNK, MORRIS S  
4847 FRED GLADSTONE DRIVE  
WEST PALM BEACH, FL 33417 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: D ( ) Delete  
Name: GACKENHEIMER, E. DREW  
Address: 4847 FRED GLADSTONE DR  
City-St-Zip: W. PALM BEACH, FL 33417

Title: VP ( ) Delete  
Name: KATZ, STANLEY M  
Address: TWO NORTH BREAKERS ROW  
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete  
Name: SHAPIRO, ALBERT  
Address: 100 SUNRISE AVENUE  
City-St-Zip: PALM BEACH, FL 33480

Title: P ( ) Delete  
Name: LORING, ARTHUR S  
Address: 622 N FLAGLER DRIVE #1001  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T ( ) Delete  
Name: KRAMER, LEROY  
Address: 3811 LEPONT WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S ( ) Delete  
Name: BRENNER, STANLEY  
Address: 44 COCOANUT ROW #A113  
City-St-Zip: PALM BEACH, FL 33480

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: GOLDBLUM, NORMAN P  
Address: 109 EVERGLADES AVENUE  
City-St-Zip: PALM BEACH, FL 33480

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

Title: D (X) Change ( ) Addition  
Name: PLATZNER, HERBERT B  
Address: 6949 FOUNTAINS CIRCLE  
City-St-Zip: LAKE WORTH, FL 33467

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 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: ARTHUR S. LORING

P

02/08/2007

Electronic Signature of Signing Officer or Director

Date