2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# N23328

Entity Name: SOUTH PALM BEACH COUNTY HEBREW FREE LOAN SOCIETY, INC.

Current Principal Place of Business:

21300 RUTH AND BARON COLEMAN BLVD
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

21300 RUTH AND BARON COLEMAN BLVD
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 65-0015789 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BELOFF, DONN
2255 GLADES ROAD
SUITE 3402
BOCA RATON, FL 33432 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: BINADUITZ, JOY
Address: 5220 BODEGA PLACE
City-St-Zip: DELRAY BEACH, FL 33484

Title: VPD ( ) Delete
Name: SANDLER, HARVEY
Address: 17663 LAKE ESTATES DR
City-St-Zip: BOCA RATON, FL 33496

Title: DT ( ) Delete
Name: GOLDEN, MIKE
Address: 77151 MANDYLYNN CT
City-St-Zip: BOCA RATON, FL 33496

Title: ST ( ) Delete
Name: PHILLIPS, LARRY
Address: 7098 AYRSHIRE LANE
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BINKOVITZ, JOY
Address: 5220 BODEGA PLACE
City-St-Zip: DELRAY BEACH, FL 33484

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 Section 119.07(3)(i), 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: JOY BINKOVITZ PD 04/30/2004

Electronic Signature of Signing Officer or Director — Date