## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N23328

**FILED** Feb 23, 2006 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 

21300 RUTH AND BARON COLEMAN BLVD BOCA RATON, FL 33428

**Current Mailing Address: New Mailing Address:** 

21300 RUTH AND BARON COLEMAN BLVD BOCA RATON, FL 33428

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

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

BELOFF, DONN FAFFER, JACLYNN 2255 GLADES ROAD 21300 COLEMAN BOULVARD **SUITE 3402** SUITE 3402 BOCA RATON, FL 33432 US BOCA RATON, FL 33428 US

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: JACLYNN FAFFER 02/23/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition BINKOVITZ, JOY MULLAUGH, MICHAEL Name: Name: Address:

5220 BODEGA PLACE Address: 2456 NW 62ND STREET City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip: BOCA RATON, FL 33496

Title: () Delete Title: VD (X) Change ( ) Addition SANDLER, HARVEY Name: BLAIR, LARRY Name: Address: 17663 LAKE ESTATES DR Address: 2255 GLADES ROAD, SUITE 411E

City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: BOCA RATON, FL 33431

Title: () Delete Title: SD (X) Change ( ) Addition GOLDEN, MIKE FELDMAN, DIANE Name: Name:

77151 MANDYLYNN CT 21475 LINWOOD COURT Address: Address: City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: BOCA RATON, FL 33433

Title: ( ) Delete Title: TD (X) Change ( ) Addition

Name: PHILLIPS, LARRY Name: GOLDSTEIN, ALAN Address: 7098 AYRSHIRE LANE Address: 6627 NW 25TH WAY City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: BOCA RATON, FL 33496

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: MICHAEL MULLAUGH PD 02/23/2006