

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24239

Entity Name: HATIKVAH FAMILY, INC.

FILED
Aug 16, 2007
Secretary of State

Current Principal Place of Business:

2333 NW 95TH AVE.
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

1208 NW 97 AVE
PEMBROKE PINES, FL 33024 US

New Mailing Address:

2333 NW 95TH AVE.
CORAL SPRINGS, FL 33065 US

FEI Number: 65-0381536 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BOSSERT, KAREN
2333 NW 95TH AVENUE
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

MORITT, JANET RN
2333 NW 95TH AVENUE
CORAL SPRINGS, FL 33065 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: JANEY MORITT

08/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TREERY, CAROL
Address: 1142 S E 2ND AVE
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: P () Delete
Name: TERNER, ELAINE
Address: 1208 N.W. 97TH AVE.
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D () Delete
Name: VICTOR, SUSAN
Address: 217 E BAYRIDGE DR
City-St-Zip: WESTON, FL 33326

Title: D (X) Delete
Name: PORTH, ARI
Address: 9557 NW 28TH ST
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D (X) Delete
Name: FRIEDLAND, SANDRA
Address: 11729 HIGHLAND PL
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TREFRY, CAROL
Address: 1142 S E 2ND AVE
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VP (X) Change () Addition
Name: CASTLE, ROSLYN
Address: 12309 NW 26 STREET
City-St-Zip: CORAL SPRINGS, FL 33065

Title: T (X) Change () Addition
Name: KARPELES, RICHARD
Address: 11872 NW 2 COURT
City-St-Zip: CORAL SPRINGS, FL 33071

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 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: ROSLYN CASTLE

VP

08/16/2007

Electronic Signature of Signing Officer or Director

Date