

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N24239

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** HATIKVAH FAMILY, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 65-0381536

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORITT, JANET RN  
2333 NW 95TH AVENUE  
CORAL SPRINGS, FL 33065 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:** P  
**Name:** CASTLE, ROSLYN  
**Address:** 2333 NW 95 AVE  
**City-St-Zip:** CORAL SPRINGS, FL 33065

**Title:** T  
**Name:** KARPELES, RICHARD  
**Address:** 11872 NW 2 COURT  
**City-St-Zip:** CORAL SPRINGS, FL 33071

I hereby 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 all other like empowered.

**SIGNATURE:** JANET MORITT

RN,

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date