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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N24304

(0)

HOLOCAUST SURVIVORS CLUB OF BOCA RATON, INC.

FILED Feb 16 1998 8:00am Secretary of State

HOLOCAUST SURVIVORS CLUB OF BOCK NATON, INC.									
Principal Place	e of Business	Mailing Address							
112 FANSHAW C BOCA RATON FL 33434		112 FANSHAW C BOCA RATON FL 33434				3. Date Incorporated or Qualified 01/12/1988			
U\$		U\$				4. FEI Number	Ap	plied For	
						59-2145916	No	t Applicable	
2. Principal Pi	lace of Business	2a. Malling Address	<u> </u>	,			\$8.75	Additional	
21		26				5. Cerimodie of Blatos Desireo	Fee Re	quired	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.					\$5.00		
22		27			<u> </u>	Trust Fund Contribution	Added to		
City & State	9	City & State		7. Is this nonprofit corporation a homeowners a		ሰየ			
23	Country	28 Zip	Coun	de.		☐ Yes ☐			
Zip	25 29		30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
24	9. Name and Address of Cur		[30]			10. Name and Address of New Registered Ag			
	0. 112			B1	Name				
BIRNBAUM, SAUL				B2	Street Addre	ess (P.O. Box Number is Not Acceptable)			
	ISHAW C		l _a	B3					
BUCA K	ATON FL 33434		L						
			1	84	City	FL	95 Zip (Code	
11. Pursuant office or reagent. I a	to the provisions of Sections 617.1 egistered agent, or both, in the SI m familiar with, and accept the ot	0502 and 617.1508, Florida Statu ato of Florida. Such change was digations of, Section 617.0503, F	ites, the abo authorized forida Statu	ove-l by t	named corporati	oration submits this statement for the purpose of c on's board of directors. I hereby accept the appoli	hanging li ntment as	s registered registered	
SIGNATURE									
	Signature, typed or printed name of registered			Agent	signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND D	IDECTOR	C 141 2	
12.		AND DIRECTORS DELETE	13.				Change	Addition	
TITLE	PD		1.7 MIL			<u>.</u>	- Children		
NAME ATOTET ADDRESS	BIRNBAUM, SAUL 112 FANSHAW C				DODECC				
STREET ADDRESS	BOCA RATON FL			1.3 STREET ADD 1.4 CITY-ST-ZH					
CITY-ST-ZIP TITLE	VI	DELETE		2.1 TITLE		L	Change	Addition	
NAME	NOWOGROD, SONIA		2.2 NA			_	- •	_	
STREET ADDRESS	3054 LINCOLN C				DORESS	,• .			
CITY-ST-ZIP	BOCA RATON FL		2. 4 CIT			• •			
TITLE	RS	DELETE	3.1 TITL		<u></u>		Change	Addition	
NAME	LEWIN, NORA		3.2 NAA	WE					
STREET ADDRESS	2031 LINCOLN B		3.3 STR	EET A	DORESS				
CITY-ST-ZIP	BOCA RATON FL		3.4. CIT	Y-\$T-	- ZIP				
TITLE	CS	DELETE	4.1 TITL				Change	Addition	
HAME	PAULA, KALINA		4. 2 NA	ME					
STREET ADDRESS	4026 YARMOUTH B		4.3 STR	EET A	DDRESS				
CITY-ST-ZIP	BOCA RATON FL		4,4 CIT	Y-\$1-	-ZIP				
TITLE	FST	DELETE	5.1 TiTL	5.1 TITLE			Change	☐ Addition	
NAME	SILVERMAN, LEONA		5.2 NA	ME					
STREET ADDRESS	196 MANSFIELD E		5.3 STR	REET A	ODRESS				
CITY-ST-ZIP	BOCA RATON FL		5.4 CIT	5.4 CITY-ST-ZIP					
TITLE	٧	DELETE	6.1 TITL	LE			Change	Addition	
NAME	Kuperberg, ICEK		6.2 NA)	ME	1				
STREET ADDRESS	4038 WOLVERTON B		6.3 STR	REET A	DDRESS				
CITY-ST-ZIP	BOCA RATON FL		6.4 CIT	Y-ST-	- ZIP				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the Information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: