

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25422

FILED
Feb 25, 2010
Secretary of State

Entity Name: JACKSONVILLE JEWISH CENTER

Current Principal Place of Business:

3662 CROWN POINT RD
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

3662 CROWN POINT RD
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 59-0624411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, JEFFREY B
2064 PARK ST
JACKSONVILLE, FL 32204 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: CD
Name: MORRIS, JEFFERY
Address: 3311 BEAUCLERC RD
City-St-Zip: JACKSONVILLE, FL 32257 DU

Title: CB
Name: ZIMMERMAN, SANFORD
Address: 8106 WOODPECKER TRAIL
City-St-Zip: JACKSONVILLE, FL 32256 DU

Title: P
Name: LEVINE, MITCHELL DR
Address: 2823 FOREST CIRCLE
City-St-Zip: JACKSONVILLE, FL 32257 DU

Title: S
Name: SHORSTEIN, BETH-
Address: 11045 RIVERPORT COURT
City-St-Zip: JACKSONVILLE, FL 32223 DU

Title: VPF
Name: DUBOW, MICHAEL
Address: 7016 GAINES CT
City-St-Zip: JACKSONVILLE, FL 32217 DU

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: LORI SCHOETTLER

DF

02/25/2010

Electronic Signature of Signing Officer or Director

Date