

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25954

FILED  
Mar 17, 2010  
Secretary of State

**Entity Name:** HABONIM CULTURAL CLUB-SURVIVORS OF THE HOLOCAUST INC.

**Current Principal Place of Business:**

601 THREE ISLANDS BLVD  
#409  
HALLANDALE, FL 33009

**New Principal Place of Business:**

9634 HARDING AVENUE  
SURFSIDE, FL 33154

**Current Mailing Address:**

601 THREE ISLANDS BLVD  
#409  
HALLANDALE, FL 33009

**New Mailing Address:**

9634 HARDING AVENUE  
SURFSIDE, FL 33154

**FEI Number:** 65-0058563

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GODLEWICZ, MICHAEL  
601 THREE ISLANDS BLVD  
HALLANDALE, FL 33009 US

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

LIEBERMAN, STUART  
9634 HARDING AVENUE  
SURFSIDE, FL 33154 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: STUART LIEBERMAN

03/17/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GASSON, SAM  
Address: 178001 ATLANTIC BLVD.  
City-St-Zip: MIAMI BCH., FL

Title: TD  
Name: LIBERMAN, STUART  
Address: 9634 HARDING AVE  
City-St-Zip: SURFSIDE, FL 33154

Title: SD  
Name: GODLEWICZ, MICHAEL  
Address: 601 THREE ISLANDS BLVD  
City-St-Zip: HALLANDALE, FL

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: STUART LIEBERMAN

TD

03/17/2010

Electronic Signature of Signing Officer or Director

Date