2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40167

FILED Apr 01, 2009 Secretary of State

Entity Name: COMMISSION FOR JEWISH EDUCATION OF THE PALM BEACHES, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3267 N MILITARY TRAIL WEST PALM BEACH, FL 33409					
Current Ma	ailing Address	s:	New Mailing Addres	New Mailing Address:	
	ITARY TRAIL M BEACH, FL	33409			
FEI Number:	65-0219982	FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
SCHAUDER, STEVEN 3267 N MILITARY TRAIL WEST PALM BEACH, FL 33409 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:					
	Electronic	ic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	HOLMES, SUZAN 3 ALSTON ROAD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	JACOBSON, STA 103 TERRA LINE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	EFRON, NEIL 2637 MOHAWK (Delete CIRCLE EACH, FL 33409 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ()[SCHULMAN, ELI 377 NORTH LAK PALM BEACH, F	KE WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	1VP (X) I SHAPIRO, DEBB 9439 GRAND ES BOCA RATON, F	STATES WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: STEVEN SCHAUDER ED 04/01/2009