

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

DOCUMENT# N41903

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** CHABAD OF THE SPACE COAST, INC.

**Current Principal Place of Business:**

1190 HIGHWAY A1A  
SATELLITE BEACH, FL 32937 US

**New Principal Place of Business:**

**Current Mailing Address:**

1190 HIGHWAY A1A  
SATELLITE BEACH, FL 32937 US

**New Mailing Address:**

**FEI Number:** 59-3067579

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KONIKOV, ZVI  
17 BARBARA COURT  
SATELLITE BEACH, FL 32937 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: PD  
Name: KONIKOV, ZVI  
Address: 17 BARBARA CT  
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: D  
Name: PERLUMTTER, JACK  
Address: 563 HIGHWAY A1A  
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: D  
Name: DUBOV, SHOLOM B RABBI  
Address: 642 GREEN MEADOW AVE  
City-St-Zip: MAITLAND, FL 32751 US

Title: ST  
Name: KONIKOV, SHULAMIT  
Address: 17 BARBARA CT  
City-St-Zip: SATELLITE BEACH, FL 32937 US

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:** ZVI KONIKOV

PD

02/18/2011

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

\_\_\_\_\_  
Date