

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N42248**

1. Corporation Name

THE SENIOR CENTER, INC.

Principal Place of Business

Mailing Address

5000 NOB HILL ROAD
SUNRISE FL 33351

5000 NOB HILL ROAD
SUNRISE FL 33351

FILED

04 FEB 11 PM 2:47

SECRETARY OF STATE
TALLAHASSEE FLORIDA

REINSTATEMENT

03-04

200027653762
01/27/04--01017--007 **246.25

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

02/26/1991

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0245068

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
DVP	GERALD, WILLIAM	5104 WHITE OAK LN	TAMARAC FL 33319
EXD	BLECH, SANDRA B WEISBERG, GAIL	7971 NW 35 STREET 5000 NOB HILL RD	LAUDERHILL FL 33319 SUNRISE, FL 33351
DT	FRANCIS, GARBER	6006 ROYAL POINCIANA LN	TAMARAC FL 33319
DVP	BERSTEIN, WALTER LINDA GARRETT	7800 NW 86 TERR 350 E LAS OLAS BLVD	TAMARAC FL 33321 FT. LAUDERDALE, FL 33301
PD	OSHRAY, HAROLD RICHARD FINKELSTEIN	5304 WOODLANDS BLVD 1520 LAGUNA TERR	TAMARAC FL 33319 FT. LAUDERDALE FL 33314
PD	WILD, STANLEY	6201 ORCHARD TREE LANE	FORT LAUDERDALE FL 33319

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

WEISS, RICKY
1401 UNIVERSITY DR 101
CORAL SPGS FL 33041

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

Zip Code

FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Ricky J Weiss
REGISTERED AGENT MUST SIGN

Date

1/12/04

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Glenda E. Hood EXEC DIRECTOR

2/04/04

Date

Daytime Phone #

954-742-2299

CR2040 (7/03)

**THE LEO GOODMAN
SENIOR COMPLEX**



**THE DANIEL D. CANTOR
SENIOR CENTER**

Aaron and Frances Levey Senior Residence

Sam and Adele Borger Senior Residence

Kurt and Alice Walter Adult Day Care and Alzheimer Pavilion

5000 Nob Hill Road • Sunrise, Florida 33351 • Ph: 954-742-2299 • FAX: 954-749-0081

A Beneficiary Agency of the United Jewish Community of Broward County Inc.

President

RICHARD FINKELSTEIN

Immediate Past President

STANLEY (BUDDY) WILD

President Emeritus

DANIEL D. CANTOR

Executive Vice President

MORRIS SMALL

Vice Presidents at Large

LINDA GARRETT, CFP

President Senior Guild

LORRAINE WILLIAM

Secretary

RICKY J. WEISS, Esq.

Treasurer

FRAN GARBER

Board of Directors

CAREN BERG
BRUCE M. BERGER
KEN BIERMAN
SAM BORGER
FAITH DRESSLER
J. MILTON EDELSTEIN
LIBO B. FINEBERG, Esq.
CAROLE GOODMAN
MAURICE GRUBER
ROBERT ISBITTS
BERNARD H. JACOBS
ALAN LEVY
BRIAN SHERR, Esq.
DAVID SOMMER
ALICE WALTER
GERALD WILLIAM

Life Member

ELAINE COHN

Executive Director

GAIL WEISBERG, MSW

Deceased

ISADORE BELLIS
SIDNEY H. DORFMAN
JACK L. GORDON
AARON LEVEY
IRVING LIBOWSKY
SAMUEL K. MILLER, Esq.
HAROLD OSHRY
SOL SCHULMAN

February 4, 2004

Florida Dept. of State
Division of Corporations.

P.O. Box 6327

Tallahassee, Fl. 32314

Attention: Katrina

Reference: 204A00006030 & N42248

As per our conversation earlier the Senior Center did not receive the uniform business report till after January 1, 2004. The Center was not dissolved in 2003 and again we received the uniform business report after January 1, 2004. The Senior Center is requesting a refund of \$122.50 and to be reinstated. Additionally please file the fictitious name registration for the Leo Goodman Complex. The filing fee is \$50.00 and \$10.00 for a certificate. Please deduct this amount from the refund for the uniform business report. This translates the Senior Center will receive a refund for \$62.50. If you have any questions feel free to contact us.

Sincerely,

Alejandro Trevino
Fiscal Officer