

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46137

FILED
Apr 18, 2008
Secretary of State

Entity Name: NATIONAL COUNCIL OF JEWISH WOMEN, KENDALL FLORIDA SECTION, INC.

Current Principal Place of Business:

% BACKER
10502 SW 143RD COURT
MIAMI, FL 33186

New Principal Place of Business:

% MYSOREWALA
10560 SW 139 ST
MIAMI, FL 33176

Current Mailing Address:

% BACKER
10502 SW 143RD COURT
MIAMI, FL 33186

New Mailing Address:

% MYSOREWALA
10560 SW 139 ST
MIAMI, FL 33176

FEI Number: 65-0293178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SOLOVE, TRACYE K
11780 SW 89 ST
STE 204
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

MYSOREWALA, ANTONIA
10560 SW 139 ST
MIAMI, FL 33176 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: ANTONIA MYSOREWALA

04/18/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STUBINS, LOUISE
Address: 11630 SW 72 AVENUE
City-St-Zip: MIAMI, FL 33156

Title: VP () Delete
Name: VILLARDELSAZ, JUDITH
Address: 10210 SW 59 AVE.
City-St-Zip: MIAMI, FL 33156

Title: S () Delete
Name: STERN, LESLIE
Address: 9960 SW 128 ST
City-St-Zip: MIAMI, FL 33176

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BERNSTEIN, CAROLE
Address: 7995 SW 155 ST
City-St-Zip: PALMETTO BAY, FL 33157

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change () Addition
Name: MYSOREWALA, ANTONIA
Address: 10560 SW 139 ST
City-St-Zip: MIAMI, FL 33176

Title: SEC () Change (X) Addition
Name: DENISON, ROBIN
Address: 9305 SW 117 TERR
City-St-Zip: MIAMI, FL 33176

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: ANTONIA MYSOREWALA

TR

04/18/2008

Electronic Signature of Signing Officer or Director

Date