

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2007 8:00 am**  
**Secretary of State**

05-04-2007 90097 048 \*\*\*\*61.25

<b>DOCUMENT # N49388</b> 1. Entity Name <b>UNITED ORTHODOX COMMUNITY COUNCIL OF SOUTH FLORIDA, INC.</b>					
Principal Place of Business <b>763 41ST ST. STE. D MIAMI BEACH, FL 33140 US</b>			Mailing Address <b>763 41ST ST. STE. D MIAMI BEACH, FL 33140 US</b>		
2. Principal Place of Business - No P.O. Box # <b>4045 Sheridan Ave.</b>		3. Mailing Address <b>P.O. Box 402281</b>			
Suite, Apt. #, etc. <b>#214</b>		Suite, Apt. #, etc.			
City & State <b>Miami Beach, FL</b>		City & State <b>Miami Beach, FL</b>		4. FEI Number <b>65-0339829</b>	
Zip <b>33140</b>		Country <b>USA</b>		Applied For <input type="checkbox"/> Not Applicable	
Zip <b>33140</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>MOSS, BARRY 763 41ST ST. STE D MIAMI BEACH, FL 33140</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>4045 Sheridan Ave. #214</b> City <b>FL</b> Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOSS, BARRY <del>763 41ST ST. STE D</del> MIAMI BEACH, FL 33140	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>4045 Sheridan Ave. #214 (only change address here)</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOSS, JUDITH <del>763 41ST ST. STE D</del> MIAMI BEACH, FL 33140	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>(Judith - spelling error only) (change address + spelling)</b> <b>4045 Sheridan Ave. #214 (please correct)</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAMBERT, SIMEON 141-61 71ST AVE. FLUSHING, NY 11367	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <u>Barry Moss</u> <b>Barry Moss</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			May 1, 2007 (305) 538-9751 <small>Date Daytime Phone #</small>		