

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000375

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

**Entity Name:** CHABAD LUBAVITCH OF NORTHEAST FL., INC.

**Current Principal Place of Business:**

10129 HALEY RD.  
JACKSONVILLE, FL 32257 US

**New Principal Place of Business:**

**Current Mailing Address:**

10129 HALEY RD.  
JACKSONVILLE, FL 32257 US

**New Mailing Address:**

**FEI Number:** 80-0095933      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KAHANOV, RABBI Y  
10129 HALEY RD.  
JACKSONVILLE, FL 32257 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: KAHANOV, RABBI Y  
Address: 2967 BRAEMAR DRIVE  
City-St-Zip: JACKSONVILLE, FL

Title: VD  
Name: COHEN, JEFF  
Address: 8814 HEAVENSIDE CT.  
City-St-Zip: JACKSONVILLE, FL

Title: TD  
Name: KAHANOV, RIVKIE  
Address: 2967 BRAEMAR DRIVE  
City-St-Zip: JACKSONVILLE, FL

Title: SD  
Name: BRONOWITZ, RICHARD  
Address: 3133 WATSON DRIVE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32257

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: RIVKIE KAHANOV

TD

01/10/2012

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

\_\_\_\_\_  
Date