

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000832

FILED
Apr 28, 2006
Secretary of State

Entity Name: CHABAD LUBAVITCH OF DELRAY-BOYNTON BEACH, INC.

Current Principal Place of Business:

7495 W ATLANTIC AVE
220
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

7495 W ATLANTIC AVE
220
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 62-1628885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KORF, SHOLOM B RABBI
7271 W. ATLANTIC AVE.
DELRAY BEACH, FL 33446 US

Name and Address of New Registered Agent:

KORF, SHOLOM B RABBI
7495 W. ATLANTIC AVE.
DELRAY BEACH, FL 33446 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: SHOLOM B. KORF

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KORF, SHOLOM B RABBI
Address: 7271 W. ATLANTIC AVE.
City-St-Zip: DELRAY BEACH, FL 33446

Title: D () Delete
Name: CIMENT, SHOLOM RABBI
Address: 11211 S. MILITARY TRAIL
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: KORF, RIVKA
Address: 7271 W. ATLANTIC AVE.
City-St-Zip: DELRAY BEACH, FL 33446

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KORF, SHOLOM B RABBI
Address: 7495 W. ATLANTIC AVE.
City-St-Zip: DELRAY BEACH, FL 33446

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

Title: D (X) Change () Addition
Name: KORF, RIVKA
Address: 7495 W. ATLANTIC AVE.
City-St-Zip: DELRAY BEACH, FL 33446

I hereby certify that the information supplied with this filing does not qualify for the 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: SHOLOM B. KORF

D

04/28/2006

Electronic Signature of Signing Officer or Director

Date