

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003149

FILED
Apr 21, 2009
Secretary of State

Entity Name: JEWISH YOUNG ADULT NETWORK, INC.

Current Principal Place of Business:

8280 SW 103 ST.
MIAMI, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

8280 SW 103 ST.
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 65-0591124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIRSH, MICHAEL A
HIRSH & COMPANY CPA
7990 SW 117TH AVE., SUITE 203
MIAMI, FL 33183 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 () Delete
Name: HIRSH, MICHAEL A
Address: 8280 SW 103 STREET
City-St-Zip: MIAMI, FL 33156 US

Title: VPD () Delete
Name: HIRSH, LISA
Address: 8280 SW 103 STREET
City-St-Zip: MIAMI, FL 33156 US

Title: SD () Delete
Name: HIRSH, CHARLES
Address: 10270 SW 109 STREET
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MICHAEL A. HIRSH

PD

04/21/2009

Electronic Signature of Signing Officer or Director

Date