

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000004595

1. Entity Name

BOCA RATON JUDAIC FELLOWS PROGRAM, INC.

FILED
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 91432 027 ****61.25

Principal Place of Business

7900 MONTOYA CIRCLE SOUTH
BOCA RATON FL 33433

Mailing Address

7900 MONTOYA CIRCLE SOUTH
BOCA RATON FL 33433

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0619773

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRONDER, RABBI KENNETH
1900 MONTAGA CIRCLE
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Name Brander, Rabbi Kenneth

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COHAN, HELEN 4885 HUNTERS WAY BOCA RATON FL 33434	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FREEDMAN, SIMCHA 22265 LARKSPUR TRAIL BOCA RATON FL 33433	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ALLSWONG, ELLIOT 22147 LARKSPUR TRAIL BOCA RATON FL 33433	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILLINGS, JEFF 7575 LONDON LN BOCA RATON FL 33433-F	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRANDER, RABBI KENNETH 7900 MONTOYA CIRCLE BOCA RATON FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCHECTER, DANA 7814 TENNYSON CT BOCA RATON FL 33433	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
President Pearlman, Penny 6737 Portside Drive Boca Raton, FL 33433	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Allswong, Elliot 22147 Larkspur Trail Boca Raton, FL 33433	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Willings, Jeff 7575 London Lane Boca Raton, FL 33433	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
President Roger Gladstone 8543 Horse Shoe Lane Boca Raton, FL 33496	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)