

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004595

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: THE COMMUNITY KOLLEL, INC.

## Current Principal Place of Business:

7900 MONTOYA CIRCLE NORTH  
BOCA RATON, FL 33433

## New Principal Place of Business:

## Current Mailing Address:

7900 MONTOYA CIRCLE NORTH  
BOCA RATON, FL 33433

## New Mailing Address:

FEI Number: 65-0619773

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRANDER, RABBI KENNETH  
22198 HOLLYHOCK TRAIL  
BOCA RATON, FL 33433 US

## Name and Address of New Registered Agent:

MISHKIN, BETH PRES  
3440 WINDSOR PLACE  
BOCA RATON, FL 33496 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: BETH MISHKIN

04/26/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: COHAN, HELEN  
Address: 4885 HUNTERS WAY  
City-St-Zip: BOCA RATON, FL 33434

Title: P ( ) Delete  
Name: MISHKIN, BETH  
Address: 3440 WINDSOR PLACE  
City-St-Zip: BOCA RATON, FL 33496

Title: D ( ) Delete  
Name: FISHER, ALAN  
Address: 22212 HOLLYHOCK TRAIL  
City-St-Zip: BOCA RATON, FL 33433

Title: D ( ) Delete  
Name: BRANDER, RABBI KENNETH  
Address: 22198 HOLLYHOCK TRAIL  
City-St-Zip: BOCA RATON, FL 33433

Title: D ( ) Delete  
Name: GLADSTONE, ROGER  
Address: 8563 HORSESHOE LN  
City-St-Zip: BOCA RATON, FL 33496

Title: D ( ) Delete  
Name: BENSMIHEN, JOSEPH  
Address: 7350 ANDORRA PLACE  
City-St-Zip: BOCA RATON, FL 33433

## 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:

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 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: BETH MISHKIN

PRES

04/26/2006

Electronic Signature of Signing Officer or Director

Date