2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000528

FILED Jan 12, 2005 Secretary of State

Entity Name: BREVARD JEWISH COMMUNITY SCHOOL, INC.

Current Principal Place of Business: New Principal Place of Business:

5995 N WICKHAM ROAD MELBOURNE, FL 32940

Current Mailing Address: New Mailing Address:

5995 N WICKHAM ROAD MELBOURNE, FL 32940 US

FEI Number: 42-1591825 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SALUCK, LISA

496 REDSAIL WAY

SATELLITE BEACH, FL 32937 US

ROSENBERG, ALAN
311 SIXTH AVENUE
INDIALANTIC, FL 32903 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: ALAN ROSENBERG 01/12/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: () Change() Addition

 Name:
 DELIGDISH, SHARON
 Name:

 Address:
 815 SANDERLING DR
 Address:

 City-St-Zip:
 INDIALANTIC, FL 32903
 City-St-Zip:

Title: DVP () Delete Title: () Change () Addition

 Name:
 BROMBERG, ANITA
 Name:

 Address:
 560 AMBER LANE
 Address:

 City-St-Zip:
 COCOA, FL 32926
 City-St-Zip:

Title: DT () Delete Title: DT (X) Change () Addition

Name: SALUCK, LISA Name: SITKOFF, DONNA

 Address:
 496 REDSAIL WAY
 Address:
 221 PRINCE WILLIAM COURT

 City-St-Zip:
 SATELLITE BEACH, FL 32937
 City-St-Zip:
 SATELLITE BEACH, FL 32937

Title: DS () Delete Title: DS (X) Change () Addition

 Name:
 LEFF, LISA
 Name:
 KANANACK, LEE

 Address:
 542 CARMEL DRIVE
 Address:
 417 ORIOLE LANE

 City-St-Zip:
 MELBOURNE, FL 32940
 City-St-Zip:
 INDIALANTIC, FL 32903

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DONNA L. SITKOFF DT 01/12/2005