NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

5/27

FILED
Jul 01, 2003 8:00 am
Secretary of State
05-27-2003 90179 006 ****61.25

DOCUMENT # N96000000528

1. Entity Name

BREVARD JEWISH COMMUNITY SCHOOL, INC.

DO NOT WRITE IN THIS SPACE

55050327

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5995 N. WICKHAM ROAD MELBOURNE, FL 32940	5995 N. WICKHAM ROAD MELBOURNE, FL 32940
Zip / Country	Zip / Country

4. FEI Number 42-1591825 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Street Addr SALUCK, LISA
496 REDSAIL WAY
SATELLITE BEACH, FL 32937

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 _____ Lisa Saluck 5/22/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25
Initial or Amended UBR

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	P STEMBER, ARTHUR 152 ISLAND VIEW DRIVE INDIAN HARBOUR, FL 32907	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DELIGDISH, SAHRON 815 SANDERLING DRIVE INDIALANTIC, FL 32903	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T D SALUCK, LISA — TREASURER 496 REDSAIL WAY SATELLITE BEACH, FL 32937	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____