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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000000640

1. Corporation Name

JEWISH DEFENSE LEAGUE INC.

Principal Place of Business

1000 W. OAKLAND PARK BLVD. #105
FORT LAUDERDALE FL 33311

Mailing Address

1000 W. OAKLAND PARK BLVD. #105
FORT LAUDERDALE FL 33311

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suits, Apt. #, etc.		26 Suits, Apt. #, etc.		02/03/1997	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		65-0729324	
24 Country		29 Country		5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		30		6. Election Campaign Financing	
				<input type="checkbox"/> Trust Fund Contribution	

9. Name and Address of Current Registered Agent

GERSH, YERACHMIEL L
 1000 W. OAKLAND PARK BLVD. #105
 FORT LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN #2	
TITLE	PCD	1.1 TITLE	SCOTT D
NAME	GERSH, YERACHMIEL L	1.2 NAME	SCOTT MARKS
STREET ADDRESS	1000 W. OAKLAND PARK BLVD. #105	1.3 STREET ADDRESS	1000 W. OAKLAND PARK BLVD #105
CITY-ST-ZIP	FORT LAUDERDALE FL 33311	1.4 CITY-ST-ZIP	Fort Lauderdale, FL 33311
TITLE	TD	2.1 TITLE	
NAME	ROSEN, RONALD	2.2 NAME	
STREET ADDRESS	1000 W OAKLAND PARK BLVD, #105	2.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33311	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	
NAME	KEI, NEIL	3.2 NAME	
STREET ADDRESS	1000 W OAKLAND PARK BLVD, #105	3.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33311	3.4 CITY-ST-ZIP	
TITLE	VP	4.1 TITLE	
NAME	RUBIN, IRV	4.2 NAME	
STREET ADDRESS	1000 W OAKLAND BLVD, #105	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33311	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	BALGLEY, ROBERT	5.2 NAME	
STREET ADDRESS	1000 W OAKLAND PARK BLVD, #105	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33311	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	WALDMAN, A.J.	6.2 NAME	
STREET ADDRESS	10046 S.W. 44TH LANE	6.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32608	6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED PCD

3/17/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Yerachmiel L. Gersh
 Yerachmiel L. Gersh

(954) 469-0430

(954) 731-4943

CR2E-037 (11/98)