2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N97000000640**

1. Entity Name

JEWISH DEFENSE LEAGUE INC.

Principal Place of Business
1000 W. OAKLAND PARK BLVD. #105
FORT LAUDERDALE FL 33311

Mailing Address *P.O. BOX 101463*
~~1000 W. OAKLAND PARK BLVD. #105~~
FORT LAUDERDALE FL 3331◯

PO BOX 101463

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
2780 E. Fowler AV
Suite, Apt. # etc.
151
City & State
Tampa, Florida
Zip *33612* Country *USA*

3. Mailing Address
P.O. Box 10463
Suite, Apt. #, etc.
101463
City & State
Fort Lauderdale, FL.
Zip *33310* Country *USA*

4. FEI Number **65-0729324**

☐ Applied For
☐ Not Applicable

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

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6. Name and Address of Current Registered Agent

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

Same as #2

7. Name and Address of New Registered Agent

Name *Yerachmiel L. Gersh*
Street Address (P.O. Box Number is Not Acceptable) *2780 E. Fowler Av. #151*

City *Tampa* **FL** Zip Code *33162*

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Yerachmiel L. Gersh President/Director 02/11/03*

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 Florida Department of State

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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE **PCD** NAME **GERSH, YERACHMIEL L** STREET ADDRESS **1000 W. OAKLAND PARK BLVD. #105** CITY-ST-ZIP **FORT LAUDERDALE FL 33311** *Same as #2*	☐ Delete	TITLE *TD* NAME *David Hertz* STREET ADDRESS *2780 E. Fowler Av. #151* CITY-ST-ZIP *Tampa, FL. 33162*	☐ Change ☑ Addition
TITLE **TD** NAME **YARON, ZOHAR** STREET ADDRESS **1000 W OAKLAND PARK BLVD, #105** CITY-ST-ZIP **FORT LAUDERDALE FL 33311**	☑ Delete	TITLE *VP* NAME *Avraham Iskowitz* STREET ADDRESS *2780 E Fowler Ave #151* CITY-ST-ZIP *Tampa FL. 33162*	☐ Change ☑ Addition
TITLE **SD** NAME **THOMASHON, STEVEN ROY** STREET ADDRESS **1000 W OAKLAND PARK BLVD, #105** CITY-ST-ZIP **FORT LAUDERDALE FL 33311** *Same as #2*	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE **VP** NAME **RUBIN, IRV** STREET ADDRESS **1000 W OAKLAND BLVD, #105** CITY-ST-ZIP **FT LAUDERDALE FL 33311**	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE **D** NAME **BALGLEY, ROBERT** STREET ADDRESS **1000 W OAKLAND PARK BLVD, #105** CITY-ST-ZIP **FT LAUDERDALE FL 33311** *Same as #2*	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE **D** NAME **WALDMAN, A.J.** STREET ADDRESS **10046 S.W. 44TH LANE** CITY-ST-ZIP **GAINESVILLE FL 32608**	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Yerachmiel R. Gersh* *02/11/03* *954-264-0289*

Daytime Phone #