

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007161

FILED
Jan 09, 2007
Secretary of State

Entity Name: BETH HILLEL MESSIANIC FELLOWSHIP OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

1391 NW 45TH STREET
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

1164 NW 117 AVENUE
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 65-0787515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARSKY, DAVID L RABBI D
1164 NW 117 AVENUE
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARSKY, DAVID L
Address: 1164 NW 117 AVENUE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: SD () Delete
Name: BARSKY, ROBERTA A
Address: 1164 NW 117 AVENUE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VD () Delete
Name: FOGELMAN, ELEANOR
Address: 10777 W SAMPLE ROAD #203
City-St-Zip: CORAL SPRINGS, FL 33065

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:

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: DAVID L BARSKY

PD

01/09/2007

Electronic Signature of Signing Officer or Director

Date