

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001250

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: YOUNG ISRAEL OF BAL HARBOUR INC.

**Current Principal Place of Business:**

9592 HARDING AVE, 2ND FLOOR  
SURFSIDE, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 545985  
SURFSIDE, FL 33154

**New Mailing Address:**

FEI Number: 13-5611758      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PATRICK, MARTY  
1141 KANE CONCOURSE  
BAY HARBOR ISLANDS, FL 33154      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: PRES ( ) Delete  
Name: DEKELBAUM, MAX  
Address: 9592 HARDING AVE, 2ND FLOOR  
City-St-Zip: SURFSIDE, FL 33154

Title: VP1 ( ) Delete  
Name: GLUCK, JACK  
Address: 9592 HARDING AVE, 2ND FLOOR  
City-St-Zip: SURFSIDE, FL 33154

Title: VP2 ( ) Delete  
Name: SZAFRANSKI, MICHAEL  
Address: 9592 HARDING AVE, 2ND FLOOR  
City-St-Zip: SURFSIDE, FL 33154

Title: TREA ( ) Delete  
Name: SUSSMAN, JOEL  
Address: 9592 HARDING AVE, 2ND FLOOR  
City-St-Zip: SURFSIDE, FL 33154

Title: SEC ( ) Delete  
Name: KWIAT, DAVID  
Address: 9592 HARDING AVE, 2ND FLOOR  
City-St-Zip: SURFSIDE, FL 33154

**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:

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 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: MAX DEKELBAUM

Electronic Signature of Signing Officer or Director

MR.

01/20/2009

\_\_\_\_\_ Date