

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000002502

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** JEWISH MUSEUM OF FLORIDA PROPERTIES, INC.

**Current Principal Place of Business:**

301 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

**Current Mailing Address:**

301 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139 US

**New Mailing Address:**

**FEI Number:** 65-1003091      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

SIMON, GARY P  
9100 SO. DADELAND BLVD.  
SUITE 504  
MIAMI, FL 33156 US

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

SIMON, GARY P  
9500 SO. DADELAND BLVD.  
SUITE 708  
MIAMI, FL 33156 US

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

01/05/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GILLER, IRA  
Address: 301 WASHINGTON AVENUE  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: D  
Name: LEVINE, NORMAN  
Address: 301 WASHINGTON AVENUE  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: D  
Name: ZERIVITZ, MARCIA  
Address: 301 WASHINGTON AVENUE  
City-St-Zip: MIAMI BEACH, FL 33139 US

I hereby 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 all other like empowered.

SIGNATURE:

MARCIA ZERIVITZ

D

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date