

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90146 007 ***150.00

DOCUMENT # P93000065218

1. Entity Name

BANYAN SPRINGS YIDDISH CLUB, INC.

Principal Place of Business

**10153 CHESTWOOD ROAD
 BOYNTON BEACH FL 33437**

Mailing Address

**10153 CHESTWOOD ROAD
 BOYNTON BEACH FL 33437**

2. Principal Place of Business

10243 PINE DR

3. Mailing Address

10243 PINE DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BOYNTON BEACH FL

City & State

BOYNTON BEACH, FL

Zip

Country

33437 USA

Zip

Country

33437 USA

4. FEI Number

65-0441261

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

DEROW, LILLIAN

10153 CHESTWOOD ROAD

BOYNTON BEACH FL 33437

7. Name and Address of New Registered Agent

Name **AVIVA LANDERER**

Street Address (P.O. Box Number is Not Acceptable)
10243 PINE DRIVE

City **BOYNTON BEACH**

FL

Zip Code **33437**

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.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

DATE

4-1-02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
 NAME **LUBOW, RAY**
 STREET ADDRESS **10070 SHADYWOOD**
 CITY-ST-ZIP **BOYNTON BCH. FL**

TITLE **VP** ☐ Delete
 NAME **HOROVITZ, FRANK**
 STREET ADDRESS **5400 CEDAR LAKE**
 CITY-ST-ZIP **BOYNTON BCH. FL**

TITLE **S** ☐ Delete
 NAME **MARKS, ROSE**
 STREET ADDRESS **10063 SHADY WOOD**
 CITY-ST-ZIP **BOYNTON BCH. FL**

TITLE **T** ☒ Delete
 NAME **SCHAEFFER, WILLIAM**
 STREET ADDRESS **10119 ASHWOOD PLACE**
 CITY-ST-ZIP **BOYNTON BCH. FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Change ☒ Addition
 NAME **LANDERER, AVIVA**
 STREET ADDRESS **10243 PINE DRIVE**
 CITY-ST-ZIP **BOYNTON BEACH, FL 33437**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-1-02 561-364-4084

CR2E034 (9/01)