

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703702

Entity Name: JEWISH FAMILY AND COMMUNITY SERVICES, INC.**Current Principal Place of Business:**8540 BAYCENTER ROAD
JACKSONVILLE, FL 32256**Current Mailing Address:**8540 BAYCENTER ROAD
JACKSONVILLE, FL 32256 US**FEI Number:** 59-0637868**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ANSBACHER, LAWRENCE V
5150 BELFORT RD., BLDG. 100
BELFORT ROAD SOUTH PROFESSIONAL PARK
JACKSONVILLE, FL 32256-6010 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

Date

Officer/Director Detail :

Title DIRECTOR
Name SETZER, DEBRA
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name FORTUNE, RACHAEL
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title ED
Name RODRIGUEZ, COLLEEN
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title CFO
Name GIBSON, NELSON J
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title VP
Name JOHNSON, SHERYL
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title IMMEDIATE PAST PRESIDENT
Name GOLDMAN, STEPHEN
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name SACHS, JOSH
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name JOSEPH, CHARLES
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

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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: NELSON GIBSON

CFO

01/28/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name LOEB, DAVID
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name LUFRANO, MATTHEW
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name RICKOFF, MATT
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name RUSSELL, MIKE
Address 8540 BAYCENTER RD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name PRICE, NED
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name D'ARIENZO, JUSTIN
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name SHERMAN, STEVEN
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title TREASURER
Name LAWSON, JAMES
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title TREASURER
Name ROSTHOLDER, ERIK
Address 8540 BAYCENTER RD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name SISISKY, KIMBERLY
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title VP
Name SANDLER, DANIEL
Address 8540 BAYCENTER RD
City-State-Zip: JACKSONVILLE FL 32256

Title SECRETARY
Name LUIKART, CHRISTEN
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name NEIHAUS, STEVEN
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name ZIMMERMAN, CHASE
Address 8540 BAYCENTER ROAD
City-State-Zip: JACKSONVILLE FL 32256