

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737796

**Entity Name:** SAMUEL M. AND HELENE SOREF, JEWISH COMMUNITY CENTER, INC.

**FILED**  
**Apr 17, 2014**  
**Secretary of State**  
**CC7226198066**

**Current Principal Place of Business:**

6501 W SUNRISE BLVD  
FT. LAUDERDALE, FL 33313

**Current Mailing Address:**

6501 W SUNRISE BLVD  
FT. LAUDERDALE, FL 33313

**FEI Number: 59-1766701**

**Certificate of Status Desired: No**

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

LITOW, LAURENCE S  
1 E BROWARD BLVD.  
STE 1010  
FORT LAUDERDALE, FL 33301 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 P  
Name ROSENBAUM, IRVING  
Address 6501 W SUNRISE BLVD  
City-State-Zip: FT. LAUDERDALE FL 33313

Title VP  
Name DELINKO-PETERS, FRANCES  
Address 760 NW 67TH AVENUE  
City-State-Zip: PLANTATION FL 33317

Title TREASURER  
Name KANTOR, STEVE  
Address 6501 W SUNRISE BLVD  
City-State-Zip: FT. LAUDERDALE FL 33313

Title SECRETARY  
Name GONZALEZ-LEVINE, OLGA  
Address 6501 W SUNRISE BLVD  
City-State-Zip: FT. LAUDERDALE FL 33313

Title VP  
Name GOBER, DEBBIE  
Address 6501 W SUNRISE BLVD  
City-State-Zip: FT. LAUDERDALE FL 33313

Title VP  
Name RASKIN, SHERYL  
Address 6501 W SUNRISE BLVD  
City-State-Zip: FT. LAUDERDALE FL 33313

*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: FRANCES DELINKO-PETERS**

**VP**

**04/17/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date