2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 09, 2019
Secretary of State
1804332248CC

DOCUMENT# N00000001883

Entity Name: GAINESVILLE JEWISH STUDENT FOUNDATION, INC.

Current Principal Place of Business:

2020 W. UNIVERSITY AVE
GAINESVILLE, FL 32603

Current Mailing Address:

2020 W. UNIVERSITY AVE
GAINESVILLE, FL 32603 US

FEI Number: 65-1090524

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GROSSMAN, ADAM
2020 W. UNIVERSITY AVE
GAINESVILLE, FL 32603 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: RABBI ADAM GROSSMAN 05/09/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	COHN, ALAN
Address	2020 W. UNIVERSITY AVE
City-State-Zip:	GAINESVILLE FL 32603

Title	VP OF DEVELOPMENT, DIRECTOR
Name	SCHATZMAN, DARIN
Address	2020 W UNIVERSITY AVE
City-State-Zip:	GAINESVILLE FL 32603

Title	DIRECTOR
Name	AMRON, BRETT
Address	2020 W. UNIVERSITY AVE
City-State-Zip:	GAINESVILLE FL 32603

Title	DIRECTOR
Name	GORSHEIN, LEAH
Address	2020 W. UNIVERSITY AVE
City-State-Zip:	GAINESVILLE FL 32603

Title	TREASURER, DIRECTOR
Name	BRESSLER, MICHELLE
Address	2020 W. UNIVERSITY AVE
City-State-Zip:	GAINESVILLE FL 32603

Title	CEO, DIRECTOR
Name	GROSSMAN, ADAM
Address	2020 W. UNIVERSITY AVE
City-State-Zip:	GAINESVILLE FL 32603

Title	DIRECTOR
Name	BARON, MARISSA
Address	2020 W. UNIVERSITY AVE
City-State-Zip:	GAINESVILLE FL 32603

Title	DIRECTOR
Name	BAXTER, JONATHAN
Address	2020 W. UNIVERSITY AVE
City-State-Zip:	GAINESVILLE FL 32603

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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: ADAM GROSSMAN CEO 05/09/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LIPOFF, NORMAN
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603

Title DIRECTOR
Name ROOD, SHELLEY
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603

Title DIRECTOR
Name SCHWARTZ, MARC
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603

Title DIRECTOR
Name STUZIN, DAN
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603

Title DIRECTOR
Name WOLF, GREG
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603

Title DIRECTOR
Name DIRCIE, IARA
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603

Title DIRECTOR
Name RITTERBAND, NATHAN
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603

Title DIRECTOR
Name SABRA, JULIA
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603

Title DIRECTOR
Name SOKOL, BRAD
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603

Title DIRECTOR
Name WEINER, KEN
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603

Title DIRECTOR
Name COOK, BRADELY
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603

Title DIRECTOR
Name HAUBEN, SHELDON
Address 2020 W. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32603