

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

DOCUMENT# N06000010744

**Entity Name:** CHABAD AT UCF, INC.

**Current Principal Place of Business:**

600 OAK CIRCLE  
OVIEDO, FL 32765

**Current Mailing Address:**

600 OAK CIRCLE  
OVIEDO, FL 32765

**FEI Number:** 20-5758752

**Certificate of Status Desired:** No

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

LIPSKIER, CHAIM B  
600 OAK CIRCLE  
OVIEDO, FL 32765 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 D  
Name LIPSKIER, CHAIM B  
Address 600 OAK CIRCLE  
City-State-Zip: OVIEDO FL 32765

Title D  
Name LIPSKIER, RIVKA  
Address 600 OAK CIRCLE  
City-State-Zip: OVIEDO FL 32765

Title D  
Name TENNENHAUS, MENACHEM M  
Address 813 DIPLOMAT PKWY  
City-State-Zip: HALLANDALE FL 33009

Title D  
Name TENNENHAUS, NECHAMA D  
Address 813 DIPLOMAT PKWY  
City-State-Zip: HALLANDALE FL 33009

Title D  
Name DUBROWSKI, MENACHEM M  
Address 4717 GRAINARY AVENUE  
City-State-Zip: TAMPA FL 33624

*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:** CHAIM LIPSKIER

**DIRECTOR**

01/09/2014

Electronic Signature of Signing Officer/Director Detail

Date