		Electronic Signature of Registered Agent			Date	
Officer/Director Detail :						
	Title	PRESIDENT	Title	VP		
	Name	KORMAN SHELTON, ALLISON	Name	TRAGER, BRENT		
	Address	833 WATERMAN RD N	Address	3076 ISSER LANE		
	City-State-Zip:	JACKSONVILLE FL 32207	City-State-Zip:	JACKSONVILLE FL 32257		
	Title	TREASURER	Title	SECRETARY		
	Name	MILLER, DAVID	Name	SHERMAN, STEVE		
	Address	6300 SAN JOSE BLVD W	Address	304 SEA MOSS LANE		
	City-State-Zip:	JACKSONVILLE FL 32217	City-State-Zip:	PONTE VEDRA BEACH FL 32082		
	Title	EXECUTIVE DIRECTOR				
	Name	FLAGLER, MYRON				
	Address	441 CLEARWATER DR.				
	City-State-Zip:	PONTE VEDRA BEACH FL 32082				

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: MYRON FLAGLER

Electronic Signature of Signing Officer/Director Detail

03/04/2020 EXECUTIVE DIRECTOR

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1600007831

Entity Name: JEWISH COMMUNITY ALLIANCE FOUNDATION, INC.

## **Current Principal Place of Business:**

8505 SAN JOSE BOULEVARD JACKSONVILLE, FL 32217

## **Current Mailing Address:**

8505 SAN JOSE BOULEVARD JACKSONVILLE. FL 32217 US

### FEI Number: 82-1992641

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

FRISCH, ADAM 8007 HAMPTON PARK BLVD E JACKSONVILLE, FL 32256 US

SIGNATURE: ADAM FRISCH

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.

# Of Tit Na Ad Cit Tit Na Ad Cit Tit Na Ad

Date

## FILED Mar 04, 2020 Secretary of State 3539011160CC

03/04/2020

Certificate of Status Desired: Yes