

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000014451

**Entity Name:** BAIS YAAKOV OF BOCA RATON INC.

**Current Principal Place of Business:**

2555 NW SECOND AVE  
BOCA RATON, FL 33431

**Current Mailing Address:**

2555 NW SECOND AVE  
BOCA RATON, FL 33431 US

**FEI Number: 87-3837764**

**Certificate of Status Desired: Yes**

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

LYONS, JAY N  
5929 S CONGRESS AVE  
ATLANTIS, FL 33462 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: JAY LYONS**

**01/04/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ROTH, ARI  
Address 4239 NW 5TH AVE  
City-State-Zip: BOCA RATON FL 33431

Title VP  
Name HAROLD, MATHESON  
Address 4239 NW 5TH AVE  
City-State-Zip: BOCA RATON FL 33431

Title DIR  
Name JACOBSON, REBECCA  
Address 7408 SIVERWOODS CT  
City-State-Zip: BOCA RATON FL 33433

Title DIR  
Name ROTH, ARI  
Address 4239 NW 5TH AVE  
City-State-Zip: BOCA RATON FL 33431

Title V  
Name MATHESON, HAROLD  
Address 4239 NW 5TH AVE  
City-State-Zip: BOCA RATON FL 33431

Title SECRETARY, DIRECTOR  
Name ROCKOVE , MALKA  
Address 2555 NW SECOND AVE  
City-State-Zip: BOCA RATON FL 33431

Title TREASURER, DIRECTOR  
Name HALPERN, BINYOMIN  
Address 2555 NW SECOND AVE  
City-State-Zip: BOCA RATON FL 33431

*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: BINYOMIN HALPERN**

**TREASURER**

**01/04/2024**

Electronic Signature of Signing Officer/Director Detail

Date