

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000227

Entity Name: JEWISH COMMUNITY FACILITIES CORPORATION**Current Principal Place of Business:**9901 DONNA KLEIN BLVD.
BOCA RATON, FL 33428-1788**Current Mailing Address:**9901 DONNA KLEIN BLVD.
BOCA RATON, FL 33428-1788**FEI Number:** 65-0446896**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GORTZ, ALBERT W
2255 GLADES RD STE 340W
BOCA RATON, FL 33431 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	FINCH, WESLEY
Address	3625 CARLTON PL
City-State-Zip:	BOCA RATON FL 33496

Title	D
Name	PODOLSKY, BARRY
Address	3951 NW 58TH PL
City-State-Zip:	BOCA RATON FL 33496

Title	D
Name	GORTZ, ALBERT
Address	7565 BELLA VERDE WAY
City-State-Zip:	DELRAY BEACH FL 33446

Title	D
Name	LOWELL, MEL
Address	9901 DONNA KLEIN BLVD
City-State-Zip:	BOCA RATON FL 33428

Title	D
Name	BECKERMAN, MICHAEL
Address	2698 NW 41ST ST
City-State-Zip:	BOCA RATON FL 33434

Title	D
Name	GALPERN, DAVID
Address	5364 ASCOT BEND
City-State-Zip:	BOCA RATON FL 33496

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: MEL LOWELL**DIRECTOR****04/18/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date