

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 01, 2009
Secretary of State**

DOCUMENT# 731644

Entity Name: TEMPLE KOL AMI EMANU-EL, INC.

Current Principal Place of Business:

8200 PETERS ROAD
PLANTATION, FL 333243201

New Principal Place of Business:

Current Mailing Address:

8200 PETERS ROAD
PLANTATION, FL 333243201

New Mailing Address:

FEI Number: 23-7449716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHALIK, JASON
2943 E. LAKE VISTA CIRCLE
DAVIE, FL 33328 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHALIK, JASON
Address: 8200 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

Title: VPA () Delete
Name: KRAVEC, SAUL
Address: 8200 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

Title: FS () Delete
Name: GOLDNER, BRUCE
Address: 8200 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JASON CHALIK

PD

04/01/2009

Electronic Signature of Signing Officer or Director

Date