## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 735534

1. Entity Name

GOLDEN LAKES TEMPLE, INC.



Principal Place of Business Mailing Address 1470 GOLDEN LAKES BLVD. 1470 GOLDEN LAKES BLVD. WEST PALM BEACH FL 33411 WEST PALM BEACH FL 33411 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-1713631 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired BEACH PALM BLACK ALM Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NOW SAPIR, ISIDORE Street Address (P.O. Box Number is Not Acceptable) 449 GOLDEN RIVER DRIVE WEST PALM BCH FL 33411 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. ŠIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE ŧ 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Change ☐ Addition ZALESCH, HAROLD NAME NAME STREET ADDRESS 199 LAKE FRANCES DR STREET ADDRESS CITY-ST-ZIE W PALM BCH FL 33411 CITY-ST-7IP 1VPD TITLE ☐ Delete TITLE ☐ Change ☐ Addition STEINHARDT, GUNTHER NAME NAME STREET ADDRESS 208 LAKE HELEN DR STREET ADDRESS CITY-ST-ZIP W PALM BCH FL 33411 CITY-ST-ZIP SVP **Delete** SELOND VILL President ☐ Addition **NEWMAN, HARRY** RAYMOND WEST 218 LAKE MERYL DRIVE WEST PALM BLACK, FLORINA 33411 NAME NAME STREET ADDRESS 198 LAKE SUSAN LANE STREET ADDRESS CITY-ST-7IP W PALM BCH FL 33411 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition MOLINSKY, SARAH 314 LAKE EVELYN DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BCH FL CITY-ST-ZIP FS ☐ Delete TITLE ☐ Addition FELDMAN, MILTON NAME STREET ADDRESS 137 LAKE SUSAN DR. STREET ADDRESS CITY-ST-ZIP west palm bch fl CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME BERGER, ESTELLE NAME STREET ADDRESS 154 LAKE MERYL DR. APT. 159 STREET ADDRESS CITY-ST-7IP WEST PALM BCH FL 33411 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

HACCLO ZALESCH, PRESIDENT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAND DESIGNAD OF SIGNAD

516-684-8668

FILED

Jan 13, 2003 8:00 am

**Secretary of State** 

01-13-2003 90116 010 \*\*\*\*61.25

CR2E037 (10/02)