FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1996

DOCUMENT #
1. Corporation Name 749576

(5)

TEMPLE SINAL OF PALM BEACH COUNTY, INC.

Principal Place of Business		Mailing Address				T LEBUHA PADUN BABAN DEABH DUNA DUDAN	Olia Bibli Oldii Oldi	I BIBIL BIO	ilk 81811 1881	
2475 W ATLANTIC AVE DELRAY BCH FL 33445		2475 W ATLANTIC AVE DELRAY BCH FL 33445								
						3. Date Incorporated or Qualified 10/30/1979	3a, Date of Last Report 02/08/1995			
2. Principal Place o	of Business	2a. Mailing Address 26				4. FEI Number 59-1883710		-	plied For Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State				Election Campaign Financing Trust Fund Contribution	ing \$5.00 May Be Added to Fees			
Z(ρ 24				intry		B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes D Yes D No				
	Name and Address of Current	L	30	I		10. Name and Address of New Re		it		
					B1 Name					
ZWEIGENHAFT, ARTHUR				82	Street Address	Berkman, Alvin J. Address (P.O. Box Number is Not Acceptable)				
425 SHERWOOD FOREST DR				02 `	136	13624A Coconut Palm Court				
APT 103				83						
DELRAY BEACH FL 33445				84 (City		85	Zin C	;ode	
					Del	lray Beach	FL ~	′ ~33	484	
11. Pursuant to the	e provisions of Sections 617.0502 a	and 617.1508, Florida Statutes	the abo	ove-nar	med corporat	ion submits this statement for the purp of directors. Thereby accept the appo	oose of changin	g its regi	istered office	
or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.										
SIGNATURE	ALVIN J. DERKMA	/ Laubrer	Let 20.	1990	2					
Signature typical or printed name of registered agent and title if applicable (NOTE: Regis				Ment si	gnature requesti w	then reinstating) ADDITIONS/CHANGES TO OFFE	DATE CEDS AND DID	ÉCTOD	2 (N) 12	
THILF V	PO	DELETE	137	ITI F		ADDITIONS/GHANGES TO OFF	CENS AND DIN		Addition	
I -	ELDMAN, ALBERT		1.2 N				_	-		
I	16 LAGO ROAD			TREET AD	ODRESS					
	ELRAY BEACH FL		1	TY-\$1-2						
TIPLE V		DELETE	211				□ CF	ange	Addition	
NAME S	SHAW, JILL	-	22 N	AME						
STREET ADDRESS 6	80 NW 10TH COURT		235	TREET AD	DRESS					
CITY-ST-ZIP B	BOYNTON BEACH FL		2 4 0	DITY-ST-	ZIP					
TITLE P	סי	DELETE	317	ITLE			Ct	ange	☐ Addition	
I)ANZIG, MEYER		3.2 N	AME						
	051 ORANGE TERRACE		335	TREET AD)DRESS				İ	
	ELRAY BEACH FL		_	CITY-ST-	ZIP					
	P LANGUAGE	DELETE	4 1 T				□ cr	ange	Addition	
-	VARON, MARJORIE		4. 2 N							
STILLET ADDITION	729 FOREST GREEN LAKE			TREET AD						
	antana fl SD	K Y OELETE	_	11Y-\$1-1		SD	X Ct	2000	Addition	
-	BILMAN, NORTON	₹ 7.V AECCIE	51 T		1		M	e lAc	□ vao((n))	
	217 POPPY PLACE		52 N			Tucci, Carol	,			
	DELRAY BEACH FL			TREET AD		10097 Crosswind Road				
	D	K V OELETE	61 T			Boca Raton, FL 3349 ID	7.5 (X) Cr	ange	Addition	
	MELGENHAFT, ARTHUR		62 N			Berkman, Alvin J.		•		
	25 SHERWOOD FOREST DR			TREET AD		13624-A Coconut Palm	Court			
I	DELRAY BEACH FL			ITY-ST-		Delray Seach, FL 33				
14. I do hereby cer	rtify that the information supplied w	ith this filing is voluntarily furnis	hed and	does r	not qualify for	the exemption stated in Section 119.6	07(3)(k), Florida	Statutes	. I further	

certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Alvin J. Berkman Treasurer

SIGNATURE:

BIONATURE AND TWEE OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR

Desprise Phone #