

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 25, 2005 8:00 am
Secretary of State

05-25-2005 90003 040 ****61.25

DOCUMENT # 749576	
1. Entity Name TEMPLE SINAI OF PALM BEACH COUNTY, INC.	

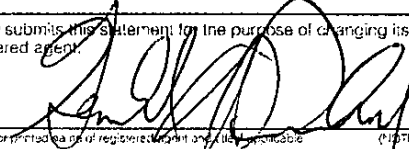
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2475 W. Atlantic Ave.		3. Mailing Address 2475 W. ATLANTIC AVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Delray Beach, FL 33445		City & State DELRAY BEACH FL	
Zip 33445	Country	Zip 33445	Country

DO NOT WRITE IN THIS SPACE

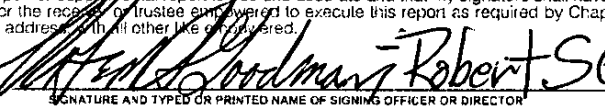
4. FEI Number 59-1883710		Applied For ☐	Not Applicable ☐
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name	
	Street Address (P.O. Box Number is Not Acceptable)	
	City FL	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.	
SIGNATURE 	DATE 5/23/05

FEE IS \$61.25 Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOODMAN, ROBERT 7554 CHARING CROSS LANE DELRAY BEACH FL 33446	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD COWEN, SANDER 9 C STRATFORD DRIVE BOYNTON BEACH, FL 33436	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD SLET, MORTON 7006 HUNTINGTON LANE, #208 DELRAY BEACH, FL 33446	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PINSKY, GERALD - TD 10030 LEXINGTON ESTATES BLVD. BOCA RATON, FL 33428	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS 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 on an attachment with an address in the state of Florida.	
SIGNATURE: 	DATE 5/20/05 561-276-6161

CR2E037B (12/02)