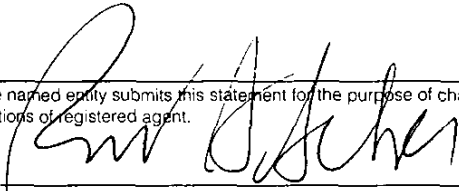
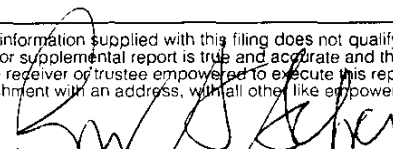


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 8:00 am
Secretary of State

01-31-2008 90028 046 ****61.25

DOCUMENT # 749576 1. Entity Name TEMPLE SINAI OF PALM BEACH COUNTY, INC.					
Principal Place of Business 2475 W ATLANTIC AVE DELRAY BCH, FL 33445			Mailing Address 2475 W ATLANTIC AVE DELRAY BCH, FL 33445		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01042008 Chg-NP CR2E037 (12/06)	
4. FEI Number 59-1883710				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WAGNER, ALBERT 6187 HELICONIA RD DELRAY BEACH, FL 33446			7. Name and Address of New Registered Agent Name Robert A. Silver Street Address (P.O. Box Number is Not Acceptable) 6687 Lake Nona Pl City Lake Worth FL Zip Code 33463		
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 1/25/08 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LONDON, MARK 3731 MYKONDS COURT BOCA RATON, FL 33487	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Co-President ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PINSKY, GERALD A DDS 10030 LEXINGTON ESTATES BLVD BOCA RATON, FL 33428	☒ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Co-President David Stern 2901 S. Ocean Blvd #804 Highland Beach, FL 33487 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVPD WAGNER, ALBERT 6187 HELICONIA RD DELRAY BEACH, FL 33484	☒ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Robert A. Silver 6687 Lake Nona Pl Lake Worth, FL 33463 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Eric Adams 4260 NW 10th St. Delray Beach, FL 33445 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
SIGNATURE:  DATE 1/25/08 Daytime Phone # 561-276-6161 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					