

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 763353

1. Entity Name

TEMPLE B'NAI ISRAEL, INC.

FILED
Mar 29, 2000 8:00 am
Secretary of State

03-29-2000 90078 010 ****61.25

Principal Place of Business

Mailing Address

1685 S. BELCHER ROAD
 CLEARWATER FL 33764

1685 S. BELCHER ROAD
 CLEARWATER FL 33764-6561

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1404489

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SNYDER, RICHARD
1430 HERCULES AVE
CLEARWATER FL

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.

SIGNATURE *Richard Snyder*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/7/00

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME **PD**
 STREET ADDRESS **SNYDER, RICHARD**
 CITY-ST-ZIP **1430 HERCULES AVE**
CLEARWATER FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **FVD**
 STREET ADDRESS **SNYDER, RICHARD**
 CITY-ST-ZIP **1430 HERCULES AVE.**
CLEARWATER FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **FVD**
 STREET ADDRESS **FLASHENBURG, BRUCE**
 CITY-ST-ZIP **13180 84TH TERR N.**
SEMINOLE FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **TFVD**
 STREET ADDRESS **STRIKOWSKY, STEPHANIE**
 CITY-ST-ZIP **2432 STAG RUN BLVD.**
CLEARWATER FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **FVD**
 STREET ADDRESS **HOFFMAN, SHELDON**
 CITY-ST-ZIP **3343 E LAKE SHORE LN**
CLEARWATER FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **S**
 STREET ADDRESS **WEINSTOCK, SHEILA**
 CITY-ST-ZIP **3021 STATE RD 590 #411**
CLEARWATER FL

TITLE Change Addition
 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard Snyder*

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)