

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005838

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Entity Name:** CONGREGATION SHAAREI KODESH OF BOCA RATON, INC.

**Current Principal Place of Business:**

19785 HAMPTON DR  
SUITE # 4  
BOCA RATON, FL 33434 US

**New Principal Place of Business:**

**Current Mailing Address:**

19785 HAMPTON DR  
SUITE #4  
BOCA RATON, FL 33434 US

**New Mailing Address:**

**FEI Number:** 20-1284887      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MURSTEIN, MARJORIE  
2297 NW 55TH ST  
BOCA RATON, FL 33496 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: VP/D  
Name: PESSAH, AMY  
Address: 22184 WOODSET LN  
City-St-Zip: BOCA RATON, FL 33428

Title: P/D  
Name: ARONSON, HEIDI  
Address: 19150 SKYRIDGE CIRCLE  
City-St-Zip: BOCA RATON, FL 33498

Title: VP/D  
Name: KATZ, NICOLE  
Address: 9509 NEW WATERFORD COVE  
City-St-Zip: DELRAY BEACH, FL 33446

Title: VP/D  
Name: SALAMA, DARA  
Address: 9511 BARLETTA WINDS POINT  
City-St-Zip: DELRAY BEACH, FL 33446

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: HEIDI ARONSON

PRES

04/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date