

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737982

Entity Name: TEMPLE BETH EMET, INC.**Current Principal Place of Business:**4807 S. FLAMINGO ROAD
COOPER CITY, FL 33330**Current Mailing Address:**4807 S. FLAMINGO ROAD
COOPER CITY, FL 33330 US**FEI Number:** 59-1707916**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STRAUS, ARNOLD M.JR.
10081 PINES BLVD STE C
PEMBROKE PINES, FL 33024 US*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**Officer/Director Detail :**

Title	PD
Name	LIPMAN, HOWARD
Address	4807 S. FLAMINGO ROAD
City-State-Zip:	COOPER CITY FL 33330

Title	VPD
Name	PAUL, RANDY
Address	4807 S. FLAMINGO ROAD
City-State-Zip:	COOPER CITY FL 33330

Title	TD
Name	LAURIE, LEVINE
Address	4807 S FLAMINGO ROAD
City-State-Zip:	COOPER CITY FL 33330

Title	SD
Name	MCCORD, VIVIAN
Address	4807 S FLAMINGO ROAD
City-State-Zip:	COOPER CITY FL 33330

Title	RABBI
Name	GREENSPON, BENNETT H
Address	4807 S. FLAMINGO ROAD
City-State-Zip:	COOPER CITY FL 33330

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: BENNETT GREENSPON**RABBI****01/15/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date