

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767513

Entity Name: LIBERAL JEWISH TEMPLE OF COCONUT CREEK, INC.**Current Principal Place of Business:**3950 COCONUT CREEK PARKWAY
COCONUT CREEK, FL 33066**Current Mailing Address:**PO BOX 934384
MARGATE, FL 33093-4384 US**FEI Number:** 59-2153135**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHLAM, HARRIET
2903 VICTORIA CIRCLE
E-2
COCONUT CREEK, FL 33066 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:** HARRIET SHLAM

01/12/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	GROPER, ELAINE
Address	1801 ELEUTHERA PT H-3
City-State-Zip:	COCONUT CREEK FL 33066

Title	EXECUTIVE VP
Name	HENRY, JUDY
Address	2202 LUCAYA BEND O-1
City-State-Zip:	COCONUT CREEK FL 33066

Title	RELIGIOUS VP
Name	ARLAN, IRIS
Address	2503 ANTIGUA TERRACE C-4
City-State-Zip:	COCONUT CREEK FL 33066

Title	MEMBERSHIP VP
Name	FRIEDMAN, EVELYN
Address	1602 ABACO DRIVE G-4
City-State-Zip:	COCONUT CREEK FL 33066

Title	FINANCIAL SECRETARY
Name	SCHWIESOW, LINDA
Address	4402 MARTINIQUE CT. J-3
City-State-Zip:	COCONUT CREEK FL 33066

Title	TREASURER
Name	SHLAM, HARRIET
Address	2903 VICTORIA CIRCLE E-2
City-State-Zip:	COCONUT CREEK FL 33066

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: ELAINE GROPER

PRESIDENT

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date