

2013 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:**HERSCHBEIN, IRVING
4133 CARAMBOLA CIR S G-104
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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

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

Title VP
Name SHLAM, HARRIET
Address 2903 VICTORIA CIR. E-2
City-State-Zip: COCONUT CREEK FL 33066

Title VP
Name GROPER, ELAINE
Address 1801 ELEUTHERA PT. H3
City-State-Zip: COCONUT CREEK FL 33066

Title VP
Name BEIER, ANN
Address 2802 VICTORIA WAY A4
City-State-Zip: COCONUT CREEK FL 33066

Title FS
Name LEVINE, DONALD
Address 2903 VICTORIA CIRCLE M1
City-State-Zip: COCONUT CREEK FL 33066

Title T
Name IRVING, HERSCHEIN
Address 4133 CARAMBOLA CIR. S. G-104
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: HARRIET SHLAM**PRESIDENT****01/15/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date