

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 769564

**FILED**  
**Feb 10, 2017**  
**Secretary of State**  
**CC8631623079**

**Entity Name:** TEMPLE BETH TIKVAH OF GREENACRES, INC.

**Current Principal Place of Business:**

4550 JOG RD.  
GREENACRES, FL 33467-4160

**Current Mailing Address:**

4550 JOG RD.  
GREENACRES, FL 33467-4160

**FEI Number:** 59-2286877

**Certificate of Status Desired:** No

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

SINGER, LEONARD  
1860 FOREST HILL BLVD  
SUITE #201  
WEST PALM BEACH, FL 33406 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           PRESIDENT  
Name           UFFER, IRA  
Address        9217 VIA ELEGANTE  
City-State-Zip: WELLINGTON FL 33411

Title           VP  
Name           COHEN , JOSEPH  
Address        9535 CHERRY BLOSSOM TERR  
City-State-Zip: BOYNTON BEACH FL 33437

Title           VP  
Name           LEVINE, MARK  
Address        4417 HUNTING TRAIL  
City-State-Zip: LAKE WORTH FL 33467

Title           VP  
Name           NORACK, MARLA  
Address        12247 SANNENWOOD AVE  
City-State-Zip: WELLINGTON FL 33414

Title           TREASURER  
Name           GOLDBERG, ANNA  
Address        10556 WILLOW OAK CT  
City-State-Zip: WELLINGTON FL 33414

Title           FINANCIAL SECRETARY  
Name           NEWMAN, LARRY  
Address        2638 GATELY DR. E. #70  
City-State-Zip: WEST PALM BEACH FL 33415

Title           RECORDING SECRETARY  
Name           NEVIASER, ALVIN  
Address        7737 ROYALE RIVER LANE  
City-State-Zip: LAKE WORTH FL 33467

Title           CORRESPONDING SECRETARY  
Name           ALPER, BARBARA  
Address        KINGSWOOD F 123  
City-State-Zip: WEST PALM BEACH FL 33417

*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:** IRA UFFER

**PRESIDENT**

**02/10/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date