

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708719

FILED
Jan 18, 2005
Secretary of State

Entity Name: TEMPLE ISRAEL OF BREVARD COUNTY, INC.

Current Principal Place of Business:

7350 LAKE ANDREW DRIVE
MELBOURNE, FL 32940 US

New Principal Place of Business:

Current Mailing Address:

7350 LAKE ANDREW DRIVE
MELBOURNE, FL 32940 US

New Mailing Address:

FEI Number: 59-1061563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENFIELD, HARRY
800 E MERRITT ISLAND CAUSEWAY
SUITE 202
MERRITT ISLAND, FL 32932 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: PD () Delete
Name: MILES, CAROL
Address: 7350 LAKE ANDREW DR
City-St-Zip: MELBOURNE, FL 32940

Title: 1VPD () Delete
Name: YUONG, DEBRA
Address: 7350 LAKE ANDREW DR
City-St-Zip: MELBOURNE, FL 32940

Title: 2VPD () Delete
Name: KERNESS, BARRY
Address: 7350 LAKE ANDREW DR
City-St-Zip: MELBOURNE, FL 32940

Title: TD () Delete
Name: ROSENBERG, TOM
Address: 7350 LAKE ANDREW DR
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: 1VPD (X) Change () Addition
Name: YOUNG, DEBRA
Address: 7350 LAKE ANDREW DR
City-St-Zip: MELBOURNE, FL 32940

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICIA CATALANO

ADMN

01/18/2005

Electronic Signature of Signing Officer or Director

Date