

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90118 030 ****61.25

DOCUMENT # 709339

1. Entity Name
TEMPLE BETH ISRAEL, INC.



Principal Place of Business
7100 W OAKLAND PARK BLVD
SUNRISE FL 33313

Mailing Address
7100 W OAKLAND PARK BLVD
SUNRISE FL 33313

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1113470

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LIPNACK, MARTIN
7421 SW 20TH ST.
PLANTATION FL 33317

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Delete
NAME **GORDON, LAWRENCE**
STREET ADDRESS **1705 ANDROS ISLE #2**
CITY-ST-ZIP **COCONUT CREEK FL 33066**

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** ☐ Delete
NAME **HELLER, LEON**
STREET ADDRESS **7360 SW 6 STREET**
CITY-ST-ZIP **PLANTATION FL 33317**

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **ST** ☐ Delete
NAME **PROCTON, LLOYD**
STREET ADDRESS **1070 NW 96 AVENUE**
CITY-ST-ZIP **PLANTATION FL 33322**

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **SCHWARTZ, H Y**
STREET ADDRESS **7100 W OAKLAND PARK BLVD**
CITY-ST-ZIP **SUNRISE FL 33313**

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **KING, SHELDON**
STREET ADDRESS **7100 W OAKLAND PARK BLVD**
CITY-ST-ZIP **SUNRISE FL 33313**

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME **WAIT, TERRY**
STREET ADDRESS **7100 WEST OAKLAND PARK BLVD.**
CITY-ST-ZIP **SUNRISE FL 33313**

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *LEON HELLER*

3/31/03 954-742-4040

CR2E037 (10/02)