

FILE NOW: FILING FEE IS \$61.25

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Apr 29 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **712756** (6)

1. Corporation Name

TEMPLE EMANU-EL OF GREATER MIAMI, INC.



Principal Place of Business 1701 WASHINGTON AVE MIAMI BEACH FL 33139	Mailing Address 1701 WASHINGTON AVE MIAMI BEACH FL 33139
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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3. Date incorporated or Qualified 05/16/1967	
4. FEI Number 59-0711180	Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent SHANTZ, SCHTZMAN & AARONSON 200 S BISCAYNE BLVD #3650 SE FINANCIAL CENTER MIAMI FL 33131	
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10. Name and Address of New Registered Agent 81 Name Richard Alan Lehman 82 Street Address (P.O. Box Number is Not Acceptable) 777 41st Street Fourth Floor 83 Fourth Floor 84 City Miami Beach FL 85 Zip Code 33140	
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	P
NAME	ADLER, MICHAEL
STREET ADDRESS	8181 NW 14TH ST
CITY-ST-ZIP	MIAMI FL
TITLE	D
NAME	SCHANTZ, LAWRENCE
STREET ADDRESS	200 S. BISCAYNE BLVD.
CITY-ST-ZIP	MIAMI FL
TITLE	D
NAME	ZIRULNICK, JEFFREY
STREET ADDRESS	14557 S.W. 94 LANE
CITY-ST-ZIP	MIAMI FL
TITLE	T
NAME	KAPLAN, IAN
STREET ADDRESS	1717 N. BAYSHORE DR., STE. 2000
CITY-ST-ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	TIGOR HALLID P/D ☐ Change ☒ Addition
1.2 NAME	TIGOR HALLID
1.3 STREET ADDRESS	100 South Biscayne Boulevard, Suite 1100
1.4 CITY-ST-ZIP	Miami FL 33131
2.1 TITLE	V/D ☐ Change ☒ Addition
2.2 NAME	GARY EIDELSTEIN
2.3 STREET ADDRESS	2665 South Bayshore Drive, Suite 908
2.4 CITY-ST-ZIP	Miami Beach, FL 33133
3.1 TITLE	S/D ☐ Change ☐ Addition
3.2 NAME	RICHARD ALAN LEHMAN
3.3 STREET ADDRESS	777 41st Street, Fourth Floor
3.4 CITY-ST-ZIP	Miami Beach, FL 33140
4.1 TITLE	JOHN KOENIG T/D ☐ Change ☒ Addition
4.2 NAME	JOHN KOENIG
4.3 STREET ADDRESS	777 41st Street, Suite 310
4.4 CITY-ST-ZIP	Miami Beach, FL 33140
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard Alan Lehman 3/2/98 (605) 534-1223

CR2E037 (10/97)