

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713242

FILED
Apr 25, 2005
Secretary of State

Entity Name: TEMPLE BETH EL OF BOCA RATON, INC.

Current Principal Place of Business:

333 S.W. 4TH AVENUE
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

333 S.W. 4TH AVENUE
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 59-1412924 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GREENSTEIN, MS. BETTI R
1028 BEL AIR DRIVE
#3
HIGHLAND BEACH, FL 33484 US

Name and Address of New Registered Agent:

KLEIN, LEONIE M MS
311 SW 32 TERRACE
DEERFIELD BEACH, FL 33442 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: LEONIE M. KLEIN

04/25/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: JAIVEN, JACK
Address: 17117 NEWPORT CLUB DRIVE
City-St-Zip: BOCA RATON, FL 33496

Title: VT () Delete
Name: TABOR, MARK
Address: 2607 N.W. 48TH STREET
City-St-Zip: BOCA RATON, FL 33434

Title: PD () Delete
Name: APPLEBAUM, MARC
Address: 6119 VIA VENETIA SOUTH
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: SD () Delete
Name: PLATT, MARK
Address: 18182 BLUE LAKE WAY
City-St-Zip: BOCA RATON, FL 33498

Title: VP () Delete
Name: MILTON, BARBAROSH
Address: 400 S.E. 5TH AVENUE, #1006
City-St-Zip: BOCA RATON, FL 33432

Title: VP () Delete
Name: BRAND, ROBERT
Address: 9464 LAKE SERENA DRIVE
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: BEALE, DAVID
Address: 11894 ISLAND LAKES LANE
City-St-Zip: BOCA RATON, FL 33498

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

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

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

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: LEONIE M. KLEIN

D

04/25/2005

Electronic Signature of Signing Officer or Director

Date