2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 11, 2004 8:00 am Secretary of State **DOCUMENT # 715005** 02-11-2004 90028 019 \*\*\*\*61.25 TEMPLE EMANU-EL OF GREATER FORT LAUDERDALE Principal Place of Business Mailing Address 3245 W. OAKLAND PARK BLVD FT LAUDERDALE FL'33311 3245 W. OAKLAND PARK BLVD FT LAUDERDALE FL 33311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-0714816 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Gerald Damsky FINE, IRWIN 5660 SW 4TH STREET Street Address (P.O. Box Number is Not Acceptable) 8086 North Savannah Circle PLANTATION FL 33317 Fort Lauderdale, Florida 33328 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 Stonature, typed or printed name of registered agent an itle if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ■ Delete President Addition TITLE ☐ Change TITLE FINE, IRWIN Gerald Damsky NAME NAME 5660 SW 4TH STREET STREET ADDRESS STREET ADDRESS 8086 N. Savannah Circle PLANTATION FL 33317 CITY-ST-ZIP CITY-ST-ZIP Davie. Fla. 33328 VPDT ☐ Change TITLE ☐ Delete TITLE Addition BLINCHIKOFF, HAROLD NAME 3245 WEST OAKLAND PARK BOULEVARD STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33311 CITY-ST-ZIP CITY-ST-78 TITLE ☐ Delete TITLE K Change ■ Addition NÁRUFFŐ, SHIRLEY Shirley Naroff NAME NAME 3245 W OAKLAND PK BLVD. STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33311 CITY-ST-ZIP CITY-ST-ZIP Vice President TITLE ☐ Delete TITLE Change ☐ Addition MOORE, MARSHALL NAME NAME 3245 W OAKLAND PARK BLVD STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33311 City-St-7iP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NIEVES, JACLYN NAME NAME 3245 W ÓAKLAND PARK BLVD STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33311 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME

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 supplierrental 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 receiveror 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, will all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #