## 2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 720390** 1. Entity Name TEMPLE SHALOM OF DELTONA, INC.

FILED Sep 23, 2002 8:00 am Secretary of State

02-14-2002 90076 027 \*\*\*\*61.25 09-08-2002 90119 037 \*\*\*\*61.25

Principal Place of Business			Mailing Address					A (	₩ U #	U		
1785 ELKCAM BLVD DELTONA FL 32725 US			1785 ELXCAM BLVD DELTONA FL 32725 US									
2. Principal	Place of Busine	ess	3. Mailing Address		<del></del> ,							
		<u></u>						•	_			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State			City & State				4. FEI Number Applied For Not Applied For Not Applied For					<u>-</u>
Zlp Country		Zip Co		untry	5. Certificate of		of Status Desired		\$8.75	dditional	1	
5. Name and Address of Current			nt Registered Agent		<del></del>		7. Name and Address of New Registered Agent				irea	-
					Name	レ		\				┪ .
BLUMIN, 118 PALA DEBARY			<u> </u>			Address (F	P.O. Box Number	r is Not Acceptable	b.J.	_		7
	. •				CiX	Sary	<u> </u>	-	F	Zip Ci	ode 3 3	7
8. The abov	e named entity	submits this statement	for the purpose of changing its	registers	ed office o	r registere	ed agent or both	in the State of F	_	_ , _ ,	h and accord	┨
the obliga	ations of register	red agent.	1/00					,			in and accept	
	_ 1	Janu 1			ANNE			-11				
SIGNATURE		printed name of registered ag	est and site if annihisable (Alford	_	<u>_ 4 4 \</u>			9/4/02				
<del></del>	Signature, types of	Printed name of registaried ag	RILAND DUE S ADDICADIO. (NOTE	: Hegistered	a Agent Bigne:	nire required v	when reinstating)		DATE			1
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		mber 13, 2002,	9. Election Can	ıpaign Fi	inancing		<b>\$5.00</b> May Be	. J Ma	ake Che	ck Payabl	e to	
		L - 0000 05	Trust Fund C	ontahudi	ion	Ш .	Added to Coo					1
	min. will	be \$236.25.	Trust Fund C	ontributi	on.		Added to Fees			ent of Sta		
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πτε	V PILOF, HELI	OFFICERS AND I	DIRECTORS	11. TITLE		<u></u>	Added to Fees		Departm	DIRECTORS	N 10	37 (4/02)
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of the corporation or the receiver or trustee empowered to ex changed, or on an attachment with an address, with all other wered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if the letter fike empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if Kenneth Rahn

SIC	INE	ATI	UR	E: