

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 720390

**FILED**  
**Jun 30, 2004**  
**Secretary of State****Entity Name:** TEMPLE SHALOM OF DELTONA, INC.**Current Principal Place of Business:**1785 ELKCAM BLVD  
DELTONA, FL 32725 US**New Principal Place of Business:****Current Mailing Address:**1785 ELKCAM BLVD  
DELTONA, FL 32725 US**New Mailing Address:****FEI Number:** 23-7185126**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**KAHN, KENNETH  
214 ALEXANDRA WOODS DR  
DEBARY, FL 32713**Name and Address of New Registered Agent:**KORN, EDWARD S  
1325 MONTOYA DR.  
DELTONA, FL 32738

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: EDWARD S KORN

06/30/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: V ( ) Delete  
Name: PILOF, HELENE  
Address: 1241 SHARBROOKE DR  
City-St-Zip: DELTONA, FL 32725

Title: TR ( ) Delete  
Name: ROSEN, SHIRLEY,  
Address: 1202 ALGOMA STREET  
City-St-Zip: DELTONA, FL

Title: PD ( ) Delete  
Name: KAHN, KENNETH  
Address: 214 ALEXANDRA WOODS DR  
City-St-Zip: DEBARY, FL 32713

Title: FSD ( ) Delete  
Name: SCHERR, JEROME  
Address: 2964 COTTONDALE DR  
City-St-Zip: DELTONA, FL 32728

Title: TD ( ) Delete  
Name: ZARNOWIEC, TREVOR  
Address: 961 CENTENNIAL AVE  
City-St-Zip: DELTONA, FL 32728

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: PILOF, HELENE  
Address: 1241 SHARBROOKE DR  
City-St-Zip: DELTONA, FL 32725

Title: TR (X) Change ( ) Addition  
Name: ROSEN, SHIRLEY  
Address: 1202 ALGOMA STREET  
City-St-Zip: DELTONA, FL 32725

Title: PRES (X) Change ( ) Addition  
Name: KORN, EDWARD S  
Address: 1325 MONTOYA DRIVE  
City-St-Zip: DELTONA, FL 32738

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: EDWARD S KORN

PRES

06/30/2004

Electronic Signature of Signing Officer or Director

Date