


FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 23 1998 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION ANNUAL REPORT 1998</b>		 <p>FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS</p>																																																																												
<b>DOCUMENT # 726867</b> 1. Corporation Name <b>TEMPLE ZION OF CONGREGATION HILLEL/ THE FREE SYNAGOGUE CENTER, INC.</b>																																																																														
Principal Place of Business <b>414 NE 33rd Street Pompano Beach, FL 33064</b>		Mailing Address <b>P.O. Box 3 Boca Raton, FL 33429</b>																																																																												
2. Principal Place of Business <b>21 414 N.E. 33rd Street</b> Suite, Apt. #, etc. <b>22</b>		2a. Mailing Address <b>26 Post Office Box 3</b> Suite, Apt. #, etc. <b>27</b>																																																																												
City & State <b>23 Pompano Beach, FL</b>		City & State <b>28 Boca Raton, FL</b>																																																																												
Zip <b>24 33064</b>	Country <b>25 U.S.</b>	Zip <b>29 33429</b>	Country <b>30 U.S.</b>																																																																											
9. Name and Address of Current Registered Agent <b>Barry B. Rosayn 11199 Mandarin Street Boca Raton, FL 33428</b>		10. Name and Address of New Registered Agent <b>81 Name</b> <b>82 Street Address (P.O. Box Number is Not Acceptable)</b> <b>83</b> <b>84 City</b> <b>FL</b> <b>85 Zip Code</b>																																																																												
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 provisions of, Section 617.0503, Florida Statutes. SIGNATURE <i>Barry B. Rosayn</i> DATE <b>4-18-98</b> <small>(NOTE: Registered Agent signature required when reappointing)</small>																																																																														
12. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 10%;">STREET ADDRESS</td> <td style="width: 10%;">CITY - ST - ZIP</td> <td style="width: 10%;">DELETE</td> </tr> <tr> <td>Pres Dir.</td> <td>Rosayn, Barry B.</td> <td>11199 Mandarin Street</td> <td>Boca Raton, FL 33428</td> <td><input type="checkbox"/></td> </tr> <tr> <td>VP Dir.</td> <td>Rosayn, Brock F.</td> <td>649 Jaeger Drive</td> <td>Delray Beach, FL 33444</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Sec. Dir.</td> <td>Rosayn, Barry B.</td> <td>11199 Mandarin Street</td> <td>Boca Raton, FL 33428</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Dir.</td> <td>Rosayn, Joanne</td> <td>649 Jaeger Drive</td> <td>Delray Beach, FL 33444</td> <td><input type="checkbox"/></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td>STREET ADDRESS</td> <td>CITY - ST - ZIP</td> <td>DELETE</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td>STREET ADDRESS</td> <td>CITY - ST - ZIP</td> <td>DELETE</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> </table>		TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Pres Dir.	Rosayn, Barry B.	11199 Mandarin Street	Boca Raton, FL 33428	<input type="checkbox"/>	VP Dir.	Rosayn, Brock F.	649 Jaeger Drive	Delray Beach, FL 33444	<input type="checkbox"/>	Sec. Dir.	Rosayn, Barry B.	11199 Mandarin Street	Boca Raton, FL 33428	<input type="checkbox"/>	Dir.	Rosayn, Joanne	649 Jaeger Drive	Delray Beach, FL 33444	<input type="checkbox"/>	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE					<input type="checkbox"/>	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE					<input type="checkbox"/>	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1.1 TITLE</td> <td style="width: 40%;">1.2 NAME</td> <td style="width: 10%;">1.3 STREET ADDRESS</td> <td style="width: 10%;">1.4 CITY - ST - ZIP</td> <td style="width: 10%;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>2.1 TITLE</td> <td>2.2 NAME</td> <td>2.3 STREET ADDRESS</td> <td>2.4 CITY - ST - ZIP</td> <td>Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>3.1 TITLE</td> <td>3.2 NAME</td> <td>3.3 STREET ADDRESS</td> <td>3.4 CITY - ST - ZIP</td> <td>Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>4.1 TITLE</td> <td>4.2 NAME</td> <td>4.3 STREET ADDRESS</td> <td>4.4 CITY - ST - ZIP</td> <td>Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>5.1 TITLE</td> <td>5.2 NAME</td> <td>5.3 STREET ADDRESS</td> <td>5.4 CITY - ST - ZIP</td> <td>Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>6.1 TITLE</td> <td>6.2 NAME</td> <td>6.3 STREET ADDRESS</td> <td>6.4 CITY - ST - ZIP</td> <td>Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> </table>		1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE																																																																										
Pres Dir.	Rosayn, Barry B.	11199 Mandarin Street	Boca Raton, FL 33428	<input type="checkbox"/>																																																																										
VP Dir.	Rosayn, Brock F.	649 Jaeger Drive	Delray Beach, FL 33444	<input type="checkbox"/>																																																																										
Sec. Dir.	Rosayn, Barry B.	11199 Mandarin Street	Boca Raton, FL 33428	<input type="checkbox"/>																																																																										
Dir.	Rosayn, Joanne	649 Jaeger Drive	Delray Beach, FL 33444	<input type="checkbox"/>																																																																										
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE																																																																										
				<input type="checkbox"/>																																																																										
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE																																																																										
				<input type="checkbox"/>																																																																										
1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>																																																																										
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>																																																																										
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>																																																																										
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>																																																																										
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>																																																																										
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>																																																																										
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: <i>Barry B. Rosayn</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		April 18, 1998 (561) 445-9700 Date Daytime Phone #																																																																												

CR2E037 (10/97)