

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727369

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Entity Name:** TEMPLE SAMU-EL OR OLOM, INC.

**Current Principal Place of Business:**

9400 SW 87TH AVENUE  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

9400 SW 87TH AVENUE  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 23-7346131

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WEIL, ELLEN  
9400 SW 87TH AVENUE  
MIAMI, FL 33176 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WEIL, ELLEN  
Address: 9400 SW 87TH AVENUE  
City-St-Zip: MIAMI, FL 33176

Title: VPD  
Name: PENCHANSKY, JOSEPH  
Address: 9400 SW 87TH AVENUE  
City-St-Zip: MIAMI, FL 33176

Title: TD  
Name: ROSENBLOOM, HOWARD  
Address: 9400 SW 87TH AVENUE  
City-St-Zip: MIAMI, FL 33176

Title: SD  
Name: FISTEL, MYRNA  
Address: 9400 SW 87TH AVENUE  
City-St-Zip: MIAMI, FL 33176

Title: D  
Name: SLOTNICK, MICHAEL C  
Address: 9400 SW 87TH AVENUE  
City-St-Zip: MIAMI, FL 33176

Title: D  
Name: TOBOLOWSKY, DAVID  
Address: 9400 SW 87TH AVENUE  
City-St-Zip: MIAMI, FL 33176

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL C. SLOTNICK

D

01/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date