

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 01, 2007
Secretary of State**

DOCUMENT# 729516

Entity Name: CONGREGATION OF BETH EL

Current Principal Place of Business:

2815 N. FLAGLER DR.
W PALM BEACH, FL 33407 US

New Principal Place of Business:

Current Mailing Address:

2815 N. FLAGLER DR.
W PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: 59-6045467 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KLIGLER, LENNARD
2717 SENECA CIR
WEST PALM BEACH, FL 33409 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: P () Delete
Name: BIRGER, MARVIN
Address: 2770 S. OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480

Title: V () Delete
Name: YECKES, STEPHEN
Address: 14767 PALM WOOD ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: T () Delete
Name: KANIUK, JEROLD
Address: 17674 SCARSDALE WAY
City-St-Zip: BOCA RATON, FL 33496

Title: SEC () Delete
Name: WARSHAVER, JOANNE
Address: 223 SEMINOLE AVENUE
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 exemption stated in Chapter 119, 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: JEROLD KANIUK

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05/01/2007

Electronic Signature of Signing Officer or Director

Date