


FILED
Mar 11, 2005 8:00 am
Secretary of State

02-09-2005 90030 048 ****70.00

2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

| | |
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| DOCUMENT # 731799 |  |
| 1. Entity Name TEMPLE BETH ISRAEL AT CENTURY VILLAGE EAST, INC. | |

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| Principal Place of Business 201 SOUTH MILITARY TRAIL DEERFIELD BCH, FL 33442 US | Mailing Address 201 SOUTH MILITARY TRAIL DEERFIELD BCH, FL 33442 US |
|---|---|

66004151



01282005 No Chg-NP CR2E037 (10/03)

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|-----------------------------|-------------------------------|
| 4. FEI Number 23-7449719 | Applied For Not Applicable |
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| 5. Certificate of Status Desired | <input checked="" type="checkbox"/> \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent GOLDSTEIN, ANDREA 201 MILITARY TRAIL DEERFIELD BEACH, FL 33442 |
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IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Albert Friedman* *RES* *3/8/05*
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD FRIEMAN, ALBERT 3020 CAMBRIDGE A DEERFIELD BEACH, FL 33442 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 2VP LEVITT, LEWIS 3015 OAKRIDGE A DEERFIELD BEACH, FL 33442 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 3VP LOBEL, STUART 4676 APPALACHIAN ST. BOCA RATON, FL 33428 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD FELDMAN, PHILIP 417 DURHAM N DEERFIELD BEACH, FL 33442 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD WOSK, GOLDIE 679 DURHAM DEERFIELD BEACH, FL 33442 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Andrea Goldstein* *Andrea Goldstein* *3/31/05* *954-421-7060*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #