2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Mar 31, 2003 8:00 am Secretary of State

DOCUMENT # 731799 1. Entity Name TEMPLE BETH ISRAEL AT CENTURY VILLAGE EAST, INC.						03-10-2003 9	0188 035 ***	*70.00	
Principal Place of Business 201 SOUTH MILITARY TRAIL DEERFIELD BCH FL 33442 US		Mailing Address 201 SOUTH MILITARY TRAIL DEERFIELD BCH FL 33442 US			E FERTIN CORPO CINCI SIGNI SUDVA FENTO CALV GURIS				
2. Principal	Place of Business	3. Mailing Address	<u> </u>						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State		City & State		4. FEI Number 23-	7449719	 	pplied For lot Applicable	3	
Zip	Country	Zip	Cou	ntry	5. Certificate of Stat	us Desired	\$8.75 Ac	Iditional	1
	6. Name and Address of Currer	t Registered Agent			7. Name and Addre	ss of New Regist			1
	2	_ = ; = = :		Caln					1
SPIEGEL	STEVEN			Cornet Address	STEIN	HJY, DIZE	<u> </u>		4
	ITARY TRAIL			20/ 3°	(P.O. Box Number is No	PALL			
DEERFIE	eld Beach Fl. 33442		ł]
				City			Zin Cox	1e	-
<u> </u>				Deectie	11 Beach		FL 435	442	_
the obliga	e named entity submite this statement ations of registered agent.	date on a largery and		_	to _ ANDA	_			
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE		Agent signature required			DATE		7
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	FILE NOW: FEE IS \$61.25	9. Election Can Trust Fund C			\$5.00 May Be Added to Fees		Check Payable epartment of		
, ક		Trust Fund C	contribution	on. []	Added to Fees	Florida D	epartment of	State	
10.	OFFICERS AND D	Trust Fund C	antributio	on. []		Florida D	epartment of	State	(X
, ક	OFFICERS AND D	Trust Fund C	contribution	on. []	Added to Fees	Florida D	epartment of	State	10/02)
10.	OFFICERS AND D	Trust Fund C	11. TITLE	on. []	Added to Fees	Florida D	epartment of	State	7 (10/02)
10.	OFFICERS AND D FRIEMAN, ALBERT 3020 CAMBRIDGE A	Trust Fund C	11. TITLE RAME SIREE	»n. □	Added to Fees	Florida D	epartment of	State	E037 (10/02)
10. TITLE NAME * STREET ADDRESS	OFFICERS AND D	Trust Fund C	11. TITLE RAME SIREE	T ADDRESS ST-ZIP	Added to Fees ADDITIONS/CHANGES	Florida D	PEPARTMENT OF NO DIRECTORS IN Change	State 110 Addition	R2E037 (10/02)
10. TITLE NAME: STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D FRIEMAN, ALBERT 3020 CAMBRIDGE A DEERFIELD BEACH FL 33442	Trust Fund C	11. TITLE NAME SIREE CITY-	T ADORESS ST-ZIP	Added to Fees ADDITIONS/CHANGES	Florida D	epartment of ND DIRECTORS IN Change	State	CR2E037 (10/02)
10. TITLE NAME: STREET ADDRESS CITY-ST-ZIP TITLE	PD FRIEMAN, ALBERT 3020 CAMBRIDGE A DEERFIELD BEACH FL 33442 3VP BERNSTEIN, HARVEY 256 KESWICK C	Trust Fund C	11. TITLE NAME SIREE CITY- TITLE NAME STREE	T ADDRESS ST-ZIP	Added to Fees ADDITIONS/CHANGES	Florida D TO OFFICERS AI	PEPARTMENT OF ND DIRECTORS II	State 110 Addition	CR2E037 (10/02)
10. TITLE MAME STREET ADDRESS GITY-ST-ZIP TITLE NAME	PD FRIEMAN, ALBERT 3020 CAMBRIDGE A DEERFIELD BEACH FL 33442 3VP BERNSTEIN, HARVEY	Trust Fund C	11. TITLE NAME SIREE CITY- TITLE NAME STREE	T ADDRESS ST-ZIP	Added to Fees ADDITIONS/CHANGES	Florida D TO OFFICERS AI	PEPARTMENT OF ND DIRECTORS II	State 110 Addition	CR2E037 (10/02)
10. TITLE MAME: STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND D FRIEMAN, ALBERT 3020 CAMBRIDGE A DEERFIELD BEACH FL 33442 3VP BERNSTEIN, HARVEY 256 KESWICK C DEERFIELD BEACH FL 33442 2VP	Trust Fund C	11. TITLE NAME SIREE CITY- TITLE NAME STREE	T ADDRESS ST-ZIP T ADDRESS ST-ZIP AVP	Added to Fees ADDITIONS/CHANGES ADDITIONS/CHANGES ADDITIONS/CHANGES	TO OFFICERS AND TO MARTIN MARTIN MACH, FL 3	PEPARTMENT OF ND DIRECTORS II	State 110 Addition	CR2E037 (10/02)
10. TITLE MAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME	OFFICERS AND D FRIEMAN, ALBERT 3020 CAMBRIDGE A DEERFIELD BEACH FL 33442 3VP BERNSTEIN, HARVEY 256 KESWICK C DEERFIELD BEACH FL 33442 2VP GITTLEMAN, RUTH	Trust Fund C	11. TITLE NAME SIREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP A V P	Added to Fees ADDITIONS/CHANGES IEN), AT COL GRANTHA EFICLO BC	TO OFFICERS AI	Pepartment of ND DIRECTORS IN Change	State 10 Addition Addition	CR2E037 (10/02)
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12. I hereby certify that the information supplied with this filling 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE OF DIRECTOR DATE OF SIGNING OFFICER OR DIRECTOR DATE OF DIRECTOR DATE OF SIGNING OFFICER OR DATE OF SIGNING OF SIGNING OFFICER OR DATE OF SIGNING OFFICER OR DATE OF SIGNING OF SIGNING OFFICER OR DATE OF SIGNING