

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 732022 (9)
1. Corporation Name
TEMPLE B'NAI JACOB OF PALM SPRINGS, FLORIDA, INC



Principal Place of Business Mailing Address
2177 S CONGRESS AVE W PALM BCH FL 33406 2177 S CONGRESS AVE W PALM BCH FL 33406

3. Date Incorporated or Qualified 02/28/1975 3a. Date of Last Report 02/01/1995
4. FEI Number 23-7424054 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 24 Country 25 29 Zip 30 Country

9. Name and Address of Current Registered Agent
**HOFFMAN DAVID
130 HANCOCKS CT
WEST PALM BEACH FL 33413**
DELETE DECEASED

10. Name and Address of New Registered Agent
81 Name **JULIUS LEVINE**
82 Street Address (P.O. Box Number is Not Acceptable) **3100 SPRINGDALE BLVD #E04**
83
84 City **PALM SPRINGS** FL 85 Zip Code **33461**

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 obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE **7/3/96**

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
PED FRANT, JACOB 725 LORI DR. #405 PALM SPRINGS, FL 00000 DELETE
VPD HYMAN, GABAI PO BOX 536 N/A W PALM SPRINGS FL DELETE
PD GERSHON, BERNARD 7047 PINE MANOR DR LAKE WORTH FL DELETE
TD ARONOWITZ, STANLEY 3755 POINCIANA DR LAKE WORTH FL DELETE
SD LITWAK, ESTHER 5780 FERNLEY DR W #101 W PALM BCH FL DELETE
VPD ELKIN, GLADYS 719 LARI DR #104 PALM SPRINGS FL DELETE

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE President Change Addition
1.2 NAME Bernard Gershon
1.3 STREET ADDRESS 7047 Pine Manor Drive
1.4 CITY-ST-ZIP Lake Worth, FL 33467
2.1 TITLE 1st Vice President Change Addition
2.2 NAME Julius Levine **(T)**
2.3 STREET ADDRESS 3100 Springdale Blvd.
2.4 CITY-ST-ZIP Palm Springs, FL 33461
3.1 TITLE Treasurer Change Addition
3.2 NAME Martin Goldberg
3.3 STREET ADDRESS 6213 Pond Tree Circle
3.4 CITY-ST-ZIP Greenacres, FL 33463
4.1 TITLE Chairman of the Board Change Addition
4.2 NAME Stanley Aronowitz **(T)**
4.3 STREET ADDRESS 3755 Via Poinciana
4.4 CITY-ST-ZIP Lake Worth, FL 33467
5.1 TITLE Secretary Change Addition
5.2 NAME Esther Levine **(T)**
5.3 STREET ADDRESS 3100 Springdale Blvd.
5.4 CITY-ST-ZIP Palm Springs, FL 33461
6.1 TITLE **300001912393**
6.2 NAME **-08/05/96--01032--008**
6.3 STREET ADDRESS *****61.25**
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *[Signature]* DIRECTOR *[Signature]* 7/3/96 Date Day/Time/Phone #

CR2E037 (12/95)