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Mar 06 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
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 33406-7612

3. Date Incorporated or Qualified 02/28/1975 3a. Date of Last Report 08/02/1996

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEVINE, JULIUS  
3100 SPRINGDALE BLVD.  
#E104  
PALM SPRINGS FL 33461

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	T	DELETE
NAME	LEVINE, JULIUS	
STREET ADDRESS	3100 SPRINGDALE BLVD.	
CITY-ST-ZIP	PALM SPRINGS FL 33461	
TITLE	T	DELETE
NAME	ARONOWITZ, STANLEY	
STREET ADDRESS	3755 VIA POINCIANA	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	SECRETARY & DIRECTOR	DELETE
NAME	LEVINE, ESTHER	
STREET ADDRESS	3100 SPRINGDALE BLVD.	
CITY-ST-ZIP	PALM SPRINGS FL 33461	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	PRESIDENT & DIRECTOR	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	TREASURER & DIRECTOR	Change	Addition
2.2 NAME	MARTIN GOLDBERG		
2.3 STREET ADDRESS	6213 POND TREE CIRCLE		
2.4 CITY-ST-ZIP	GREENACRES, FL 33463		
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I do 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 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: \_\_\_\_\_ REQUIRED

2/28/97

CR2E037 (9/96)