2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#732022

Jan 27, 2009 Secretary of State

Entity Name: TEMPLE B'NAI JACOB OF PALM SPRINGS, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 2177 S CONGRESS AVE W PALM BCH, FL 33406 **Current Mailing Address: New Mailing Address:** 2177 S CONGRESS AVE W PALM BCH, FL 33406 FEI Number: 65-0188628 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KATES, ALVIN TERRY, HERBERT 3896 DAFILEE CIR. 253 DOVER C WEST PALM BEACH, FL 33417 US WEST PALM BEACH, FL 33417 US 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: HERBERT TERRY 01/27/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GROSS, MELVIN Name: Name: 8461 CYPRESS GLEN CT Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: Title: () Delete () Change () Addition Name: TUCKER, LOIS Name: Address: 2615 N GARDON DR #109 Address: City-St-Zip: LAKE WORTH, FL 33461 City-St-Zip: Title: () Delete Title: (X) Change () Addition FRIDENBERG, CALVIN Name: BARON, ABRAHAM Name: 5266 TIFFANY ANNE CIRCLE Address: Address: 143 HAMMOCKS DRIVE City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: WEST PALM BEACH, FL 33413 Title: () Delete Title: (X) Change () Addition Name: KATES, ALVIN Name: TERRY, HERBERT 3894 DA FILLE CIRCLE 253 DOVER C Address: Address: City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: WEST PALM BEACH, FL 33417 Title: () Delete Title: () Change () Addition SCHERZER, KENNETH Name: Name: 3546 ENGELWOOD DR#115 Address: Address: City-St-Zip: LAKE WORTH, FL 33467 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: MELVIN GROSS Т 01/27/2009