


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90049 030 ****61.25

DOCUMENT # 733743			
1. Entity Name CONGREGATION BETH HILLEL OF MARGATE, INC.			
Principal Place of Business 7640 MARGATE BLVD. MARGATE, FL 33063-3352		Mailing Address 7642 MARGATE BLVD. MARGATE, FL 33063-3352	
2. Principal Place of Business - No P.O. Box # 7638 Margate Blvd. Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State Margate, FL		City & State	
Zip 33063	Country Broward	Zip	Country
6. Name and Address of Current Registered Agent INGBER, FRED 7640 MARGATE BLVD. MARGATE, FL 33063		7. Name and Address of New Registered Agent Name Florence Zimmerman Street Address (P.O. Box Number is Not Acceptable) 7300 N.W. 4th Place #102 City Margate FL Zip Code 33063	
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 obligation of registered agent. SIGNATURE: <i>Florence Zimmerman</i> Florence Zimmerman President 3/20/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RAXENBERG, GUS 601 NW 79TH AVE MARGATE, FL 33063 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Lawrence Bernstein 6080 N.W. 44th St. #3-203 Lauderhill, FL 33319 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SOBEL, HANK 1050 COUNTRY CLUB DR. MARGATE, FL 33063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Marvin Daniels 6057 N.W. 73rd Ct. Parkland, FL 33067 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T INGBER, FRED 6750 N.W. 17TH COURT MARGATE, FL 33063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ARDEN, EUGENE 18102 CLEAR BROOK CIR BOCA RATON, FL 33498 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZIMMERMAN, FLORENCE 7300 N.W. 4TH PLACE MARGATE, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Florence Zimmerman</i>		Florence Zimmerman President 3/20/08 954-974-3090 <small>Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>	



01142008 Chg-NP CR2E037 (12/06)

4. FEI Number 59-1704551 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required