

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 27, 2008 8:00 am**  
**Secretary of State**

02-27-2008 90013 003 \*\*\*\*61.25

**DOCUMENT # 735534**

1. Entity Name

GOLDEN LAKES TEMPLE, INC.



Principal Place of Business

1470 GOLDEN LAKES BLVD.  
WEST PALM BEACH FL 33411

Mailing Address

1470 GOLDEN LAKES BLVD.  
WEST PALM BEACH FL 33411



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number  
59-1713631

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

GERSTENFERD, ANNETTE  
125 LAKE NANCY DR  
WEST PALM BEACH FL 33411

7. Name and Address of New Registered Agent

Name **ANNETTE GERSTENFELD**  
Street Address (P.O. Box Number is Not Acceptable)  
**125 LAKE NANCY DRIVE**  
City **W. PALM BEACH** FL Zip Code **33411**

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 obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature is required when registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By: May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to:**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME ZALESCH, HAROLD ☐ Delete  
STREET ADDRESS 199 LAKE FRANCES DR  
CITY-ST-ZIP W PALM BCH FL 33411

TITLE 1VPD  
NAME STEINHARDT, GUNTHER ☐ Delete  
STREET ADDRESS 208 LAKE HELEN DR  
CITY-ST-ZIP W PALM BCH FL 33411

TITLE SVP  
NAME WEST, RAYMOND ☐ Delete  
STREET ADDRESS 218 LAKE MERYL DR  
CITY-ST-ZIP WEST PALM BEACH FL 33411

TITLE TD  
NAME GERSTENFELD, ANNETTE ☐ Delete  
STREET ADDRESS 125 LAKE NANCY DR.  
CITY-ST-ZIP WEST PALM BEACH FL 33411

TITLE FS  
NAME FUKS, ADA ☐ Delete  
STREET ADDRESS 103 LAKE AVE.  
CITY-ST-ZIP WEST PALM BEACH FL

TITLE S  
NAME BERGER, ESTELLE ☐ Delete  
STREET ADDRESS 154 LAKE MERYL DR, APT. 159  
CITY-ST-ZIP WEST PALM BCH FL 33411

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **200 LAKE HELEN DR.**  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **125 LAKE NANCY DR.**  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **103 LAKE ANNE DR**  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

*Annex Gerstenfeld*

**ANNETTE GERSTENFELD**

2/19/08  
561-689-9430