

# 2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

10 of 2

FILED

04 NOV -3 PM 3:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # 736325</b> 1. Entity Name BOYNTON BEACH JEWISH CENTER BETH KODESH, INC.	
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Principal Place of Business 501 NE 26TH AVE BOYNTON BCH, FL 33435	Mailing Address 501 NE 26TH AVE BOYNTON BCH, FL 33435
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



REINSTATEMENT

4. FEI Number <b>59-1680041</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  BERKOWITZ, HARVEY 10426 COPPER LAKE DRIVE P.O. BOX 740 414 BOYNTON BEACH, FL 33437	7. Name and Address of New Registered Agent Name <b>BIRDIE, LEO</b> Street Address (P.O. Box Number is Not Acceptable) <b>5203 C EUROPA DR</b> City <b>BOYNTON BEACH</b> <b>FL</b> Zip Code <b>33437</b>
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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: Leo Birdie **LEO BIRDIE, PRES.** DATE: 10/30/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$61.25</b> After January 1, 2005, Fee will be \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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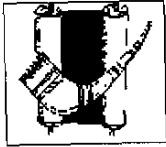
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P BERKOWITZ, HARVEY P.O. BOX 740414 BOYNTON BEACH, FL 33474	<input checked="" type="checkbox"/> Delete	TITLE	PRESIDENT BIRDIE, LEO 5203 C EUROPA DR BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VPD KLEIN, JACK 2299 NW 56 STREET BOCA RATON, FL 33496	<input checked="" type="checkbox"/> Delete	TITLE	VICE PRESIDENT BROWN, FRED 5259 E EUROPA DR. BOYNTON BEACH FL 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VP FARKAS, ARTHUR 11626 LOGAN DR BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Delete	TITLE	FINANCE VP GORIN, AMY 5204 M EUROPA DRIVE BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	TD WILLIAMS, ROGER 6100 BLUEGRASS DR BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Delete	TITLE	TREASURER KURTZMAN, JAMES 9872 LEMONWOOD WAY BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Delete	TITLE	300042435953 11/03/04--01032--004 **61.25	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 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: Leo Birdie **LEO BIRDIE, PRES.** DATE: 10/30/04 DAYTIME PHONE #: 561-369-7180

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

(5)



TEMPLE BETH KODESH  
First Conservative Synagogue of Boynton Beach



2012

Cantor

*Ivan Perlman*

President

*Leo Birdie*

501 N.E. 26<sup>th</sup> Avenue  
Boynton Beach, FL 33435  
Tel: 561-586-9428  
Fax: 561-586-4772

October 29, 2004

Division of Corporations  
PO Box 6327  
Tallahassee, Fl. 32314

Re: Boynton Beach Jewish Center Beth Kodesh, Inc.  
Document # 736325

To Whom it may concern,

I am the Financial VP of Temple Beth Kodesh and I am writing to respectfully request a waiver of the reinstatement fee for 2004. Please be advised we did not receive a renewal notice for 2004 and this has never happened before.

In addition, Temple Beth Kodesh suffered extensive damage from Hurricanes Frances and Jeanne. Unfortunately, we have been forced to relocate our operations, both religious and administrative, for an indefinite time until we can occupy our building again.

Enclosed please find our reinstatement form with payment of \$61.25 for 2004. Thank you for your consideration as this has not happened before and will not happen in the future.

Thank you for your cooperation.

Very truly yours,

Amy L. Gorin,  
Finance VP