## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#739310** 

FILED Jan 14, 2006 Secretary of State

Entity Name: TEMPLE BETH EL NORTH PORT JEWISH CENTER, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3840 S BISCAYNE DR. 3840 S BISCAYNE DR P.O. BOX 7195 NORTH PORT, FL 34287 NORTH PORT, FL 34287

**New Mailing Address: Current Mailing Address:** 

3840 S BISCAYNE DR. P.O. BOX 7195 P.O. BOX 7195

NORTH PORT, FL 34287 NORTH PORT, FL 34287

FEI Number: 59-1951464 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:

COHEN, MARC S 4219 TARGEE AVE NORTH PORT, FL 34287 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:

Name:

Address: City-St-Zip: Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition () Delete MELMED, CHARLES SAWDAI, ALBERT TREASUR Name: 1238 HIGHLAND GREENS DR Address: 3413 ROCK CREEK DR VENICE, FL 342923665 City-St-Zip: PORT CHARLOTTE, FL 33948

(X) Change ( ) Addition Title: ( ) Delete Title: Name: MELMED, HELGA Name: COHEN, SAMUEL

Address: 1283 HIGHLAND GREENS DR Address: 3332 BAILEY PALM CT City-St-Zip: VENICE, FL 34292 City-St-Zip: NORTH PORT, FL 34288

Title: PRES () Delete Title: **PRES** (X) Change ( ) Addition

COHEN, MARC Name: COHEN, MARC S Name: 45197 MCGEE AVE Address: Address: 4219 TARGEE AVE City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: NORTH PORT, FL 34287

I hereby certify that the information supplied with this filing does not qualify for the 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: MARC S COHEN **PRES** 01/14/2006