## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#739310** 

FILED Jul 13, 2008 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. NORTH PORT, FL 34287

Current Mailing Address: New Mailing Address:

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

FEI Number: 59-1951464 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COHEN, SAMUEL P SAWDAI, ALBERT
3332 BAILEY PALM CT 4413 ROCK CREEK DRIVE

NORTH PORT, FL 34287 US PORT CHARLOTTE, FL 33948 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: ALBERT SAWDAI 07/13/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TREA ( ) Delete Title: TREA (X) Change ( ) Addition Name: SAWDAI, ALBERT TREASUR Name: STORCH, MYRON TREASUR Address: 3413 ROCK CREEK DR Address: 613 LA GUNA DRIVE City-St-Zip: PORT CHARLOTTE, FL 33948 City-St-Zip: VENICE, FL 34285

Title: PRES ( ) Delete Title: PRES (X) Change ( ) Addition Name: COHEN, SAMUEL Name: SAWDAI, ALBERT

 Address:
 3332 BAILEY PALM CT
 Address:
 4413 ROCK CREEK DRIVE

 City-St-Zip:
 NORTH PORT, FL 34288
 City-St-Zip:
 PORT CHARLOTTE, FL 33948

Title: D ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 COHEN, MARC S
 Name:
 SEAGALL, MANFRED

 Address:
 4219 TARGEE AVE
 Address:
 3310 LOVELAND BLVD. #803

 City-St-Zip:
 NORTH PORT, FL 34287
 City-St-Zip:
 PORT CHARLOTTE, FL 33980

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: ALBERT SAWDAI PRES 07/13/2008