

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747017

FILED
Mar 08, 2005
Secretary of State

Entity Name: TEMPLE BETH TORAH OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

900 BIG BLUE TRACE
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

900 BIG BLUE TRACE
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 59-1946310 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CHERTOCK, STACY
869 FOREST GLEN LANE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: BAKERMAN, ERIC
Address: 13333 BURTON TERRACE
City-St-Zip: WELLINGTON, FL 33414

Title: PD () Delete
Name: CHERTOCK, STACY
Address: 869 FOREST GLEN
City-St-Zip: WELLINGTON, FL 33414

Title: VPD () Delete
Name: DENER, MEL
Address: 5025 DOBINS CR
City-St-Zip: WEST PALM BEACH, FL 33417

Title: S () Delete
Name: LOBIANCO, LINDA
Address: 8393 FRESH CREEK
City-St-Zip: WEST PALM BEACH, FL 33414

Title: S (X) Delete
Name: PLAXEN, DEBBIE
Address: 15822 BENT CREEK RD
City-St-Zip: WEST PALM BEACH, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: BAKERMAN, ERIC
Address: 13333 BURTON PLACE
City-St-Zip: WELLINGTON, FL 33414

Title: VP (X) Change () Addition
Name: MARKS, LOUISE
Address: 1185 WILDCHERRY LN
City-St-Zip: WELLINGTON, FL 33414

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: STACY CHERTOCK

PRES

03/08/2005

Electronic Signature of Signing Officer or Director

Date