2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747017

FILED Jan 10, 2007 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 900 BIG BLUE TRACE WELLINGTON, FL 33414 US **Current Mailing Address: New Mailing Address:** 900 BIG BLUE TRACE WELLINGTON, FL 33414 US FEI Number: 59-1946310 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: BAKERMAN, ERIC GREEN, JIM 900 BIG BLUE TRACE 900 BIG BLUE TRACE US WELLINGTON, FL 33414 US WELLINGTON, FL 33414 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: JAMES R. GREEN, 01/10/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete () Change () Addition BAKERMAN, ERIC W Name: Name: 13333 BURTON TERRACE Address: Address: City-St-Zip: WELLINGTON, FL, FL 33414 US City-St-Zip: Title: Title: () Delete () Change () Addition LEVI, GREGG Name: Name: Address: 10305 TRIANON PLACE Address: City-St-Zip: WELLINGTON, FL 33414 US City-St-Zip: Title: SEC () Delete Title: () Change () Addition MARKS, LOUISE S Name: Name: Address: 1185 WILD CHERRY LANE Address: City-St-Zip: WELLINGTON, FL 33414 US City-St-Zip: Title: V PR () Delete Title: () Change () Addition Name: CORDES, CHERYL Name: 13387 DOUBLETREE CIRCLE Address: Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: Title: () Delete Title: VPR () Change (X) Addition WEBER, MARCIA Name: Name: 17247 GULF PINE CIRCLE Address: Address: WELLINGTON, FL 33414 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition COHEN, DEVON Name: Name: Address: Address: 2357 SUNDERLAND AVENUE WELLINGTON, FL 33414 City-St-Zip: City-St-Zip:

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: JAMES R. GREEN ADM 01/10/2007