2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

WELLINGTON, FL 33414

WELLINGTON, FL 33414

2357 SUNDERLAND AVENUE

COHEN, DEVON

TRES

CITY-ST-ZIP

STREET ADDRESS*

TITLE

NAME

Feb 25, 2008 8:00 am Secretary of State **DOCUMENT #747017** 02-25-2008 90040 037 ****61.25 TEMPLE BETH TORAH OF PALM BEACH COUNTY, INC. Principal Place of Business Mailing Address 900 BIG BLUE TRACE 900 BIG BLUE TRACE WELLINGTON, FL 33414 WELLINGTON, FL 33414 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02142008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-1946310 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GREEN, JIM 900 BIG BLUE TRACE Street Address (P.O. Box Number is Not Acceptable) WELLINGTON, FL 33414 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2008 Added to Fees 10. 4.4. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. **PRES** TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME BAKERMAN, ERIC W NAME 13333 BURTON TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WELLINGTON, FL, FL 33414 CITY-ST-ZIP V PR TITLE ☐ Delete TITLE ☐ Change ☐ Addition LEVI, GREGG NAME NAME 10305 TRIANON PLACE STREET ADDRESS STREET ADDRESS WELLINGTON, FL 33414 CITY-ST-ZIP CITY-ST-7IP ☐ Addition TITLE ☐ Delete TITLE MARKS, LOUISE S NAMÉ NAME STREET ADDRESS 1185 WILD CHERRY LANE STREET ACORESS CITY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition CORDES, CHERYL NAME NAME STREET ADDRESS 13387 DOUBLETREE CIRCLE STREET ADDRESS WELLINGTON, FL 33414 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE WEBER, MARCIA NAME NAME 17247 GULF PINE CIRCLE STREET ADDRESS STREET ADDRESS

FILED

☐ Change - ☐ Addition

SAMUELS

DOLLARSPOTCT.

Ellington FL 33414

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

CITY-ST-ZIP

STREET ADDRESS

ÇITY-ST-ZIP

TITLE

NAME

Delete