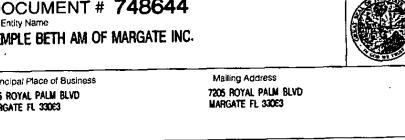
## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 748644**



**FILED** Feb 14, 2003 8:00 am Secretary of State

01-27-2003 90517 019 \*\*\*\*61.25

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TEMPLE BETH AM OF MARGATE INC.					
Principal Place of Business 7205 ROYAL PALM BLVD MARGATE FL 33063	Mailing Address 7205 ROYAL PALM BLVD MARGATE FL 33063		22003449		
				1 8181 8181 1181 1181 1181 1181	
Principal Place of Business     Mailing Address			7       10014	IS BATOAL OLOAT OLOIT OLOIT OLOIT DIOLIT 1900)	
Suite, Apt. #, etc. Suite, Apt. #, etc.			CHECK HERE IF MA	KING CHANGES	
City & State City & State			4. FEI Number 59-0169999	Applied For Not Applicable	
Zip Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
6: Name and Address of Current	Registered Agent		_7. Name and Address of New Registe	ered Agent	
			Name		
GALFOND, SANDEE `7205 ROYAL PALM BLVD		Street Address (P.O. Box Number is Not Acceptable)			
MARGATE FL 33083					
8. The above named entity submits this statement for		City	· ·	FL Zip Code	
SIGNATURE  Signature, typed or printed name of registered agen  FILE NOW: FEE IS \$61.25	st and title if applicable. (NOTE: Re  9. Election Campi Trust Fund Con		\$5.00 May Be Make C	heck Payable to epartment of State	
	\		ADDITIONS/CHANGES TO OFFICERS AN		
10. OFFICERS AND D	Delete		JOEL POLICZER	Change Addition	
NAME LYON, JAMES B	<b>~</b>	NAME 810	I BLUERISCE LAND	POSTAGE	
STREET ADDRESS 5452 NW 86TH TERRACE CORAL SPRINGS FL 33067		STREET ADDRESS CITY-ST-ZIP	AKLAND FR 3306-	) / I'VE SAUCIU	
TITLE EVPO	Delete	TITLE MAR	PCIA ROTHSTEIN (D)	Change	
NAME POLICZER, JOEL DR. STREET ADDRESS 18101 BLUERIDGE LANE		NAME 1239	1 NW LID TERRACE	EXEC_VP	
CITY-ST-ZIP PARKLAND FL 33087-		CITY-ST-ZIP COVA	al Springs 12 33071		
TITLE VPEO HOUSTON, EILEEN	Delete		R-BERR (D)	Change Addition	
STREET ADDRESS 10409 NW 8TH COURT	·	\$11.9E.7.EE.11	130 MW 104 AUE	W.	
CORAL SPRINGS FL 33071	•		UL SPRINGS F23307	Contribit Change Cardition	
VPRD NAME MARVET, AL	Delete		NLIFTON D	VP	
NAME MARVET, AL STREET ADDRESS 6013 CORAL LAKES DRIVE	•	SIRELL ASSURESS	88 NW 110 Terrace	11	
CITY-ST-ZIP MARGATE FL 33063	_ <del></del>		al Springs Fz 33076	Change	
NAME ROTHSTEIN, MARCIA	Delete	NAME /3/	HEUN GOTTLIES D	THIN. SECTY	
STREET ADDRESS 1239 NW 110TH TERRACE		STREET ADDRESS 126 COYL	LAL SPRING FE 33071	[ 1]1/ >(~1)	
CITY-ST-ZIP CORAL SPRINGS FL 33071	Delete		NCY BRODZKI D	Change	
TITLE VPM NAME BEER, TOMAS R	<b>EXTURISE</b>	■ 111LL  / */ //	**** *********************************		
	~~~~	NAME 614	18 NW 65 terrace	1/.0	
STREET ADDRESS 4930 NW 104 AVE. CITY-ST-ZIP CORAL SPRINGS FL 33076		NAME 614	18 NW 65 terrace	VP	

I hereby certify that the information supplied with this filing does not quality fer the exemption stated in Section 119.0/5/10, Profited Statutes. I that the information supplied with this filing does not quality fer the exemption stated in Section 119.0/5/10, Profited Statutes. I that the similar filing does not quality fer the exemption stated in Section 119.0/5/10, Profited Statutes. I that the certify that the information on the state 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.

SIGNATURE: