

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758796

FILED
Jan 19, 2005
Secretary of State

Entity Name: TEMPLE JUDEA OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

4311 HOOD RD.
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

4311 HOOD RD.
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 59-2100649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAULUS, MELANIE
10100 HUNT CLUB LANE
PALM BEACH GARDENS, FL 33418 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: P () Delete
Name: SLATER, CAROL
Address: 133 MONTEREY POINTE DR.
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: TD () Delete
Name: HELLER, H. DANIEL
Address: 147 ORANGE DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP () Delete
Name: SHALLOWAY, MARK
Address: 118 SATINWOOD LANE
City-St-Zip: WEST PALM BEACH, FL 33410

Title: S () Delete
Name: HOFFINGER, C. LORRAINE
Address: 2239 EMBASSY DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: V () Delete
Name: SCHNEIDERMAN, CHARLES DR.
Address: 12 BERMUDA LAKE DR.
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: V () Delete
Name: GOLDSTEIN, STEPHEN
Address: 2712 IRMA LAKE DR.
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: SHALLOWAY, MARK
Address: 10248 HUNT CLUB LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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

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

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: ELLEN LINT

TD

01/19/2005

Electronic Signature of Signing Officer or Director

Date