


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 14, 2007 8:00 am**  
**Secretary of State**

06-14-2007 90002 006 \*\*\*\*70.00

|   |   |
|---|---|
| <b>DOCUMENT # 763353</b>                    |  |
| 1. Entity Name<br>TEMPLE B'NAI ISRAEL, INC. |   |

|   |   |
|---|---|
| Principal Place of Business<br>1685 S. BELCHER ROAD<br>CLEARWATER, FL 33764 | Mailing Address<br>1685 S. BELCHER ROAD<br>CLEARWATER, FL 33764 |
|---|---|

|   |   |
|---|---|
| 2. Principal Place of Business - No P.O. Box #<br>Suite, Apt. #, etc. | 3. Mailing Address<br>Suite, Apt. #, etc. |
|---|---|

|              |              |                             |                               |
|--------------|--------------|-----------------------------|-------------------------------|
| City & State | City & State | 4. FEI Number<br>59-1404489 | Applied For<br>Not Applicable |
| Zip          | Country      | Zip                         | Country                       |



06072007 Chg-NP CR2E037 (12/06)

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|---|--|--|--|
| 6. Name and Address of Current Registered Agent<br>MINTZ, ROBERT W<br>1685 S BELCHER RD<br>CLEARWATER, FL 34677 |  | 7. Name and Address of New Registered Agent<br>Name <b>ERIC G. REITER</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>1685 S. Belcher Rd.</b><br>City <b>Clearwater</b> FL Zip Code <b>33764</b> |  |
|---|--|--|--|

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 E Greiter, Executive Director DATE 6/7/07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

|  |   |                                       |  |
|--|---|---------------------------------------|--|
| <b>Filing Fee is \$61.25</b><br><b>Due by September 14, 2007</b> | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> | <b>\$5.00</b> May Be<br>Added to Fees | <b>Make check payable to</b><br><b>Florida Department of State</b> |
|--|---|---------------------------------------|--|

| 10. OFFICERS AND DIRECTORS                     |  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |   |
|--|--|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>P</b><br>MINTZ, ROBERT<br>1286 SEAGATE DR 108<br>SEMINOLE, FL <input checked="" type="checkbox"/> Delete              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>President</b><br>BRUCE LEVINE<br>2402 BAYWOOD DRIVE West<br>DUNEDIN, FL 34698 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>V</b><br>SCHWERSKY, STEVE<br>1103 GLENN LN<br>SAFETY HARBOR, FL 34695 <input checked="" type="checkbox"/> Delete      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>V-P</b><br>TODD SIEGEL<br>10043 WINDTREE Blvd.<br>SEMINOLE, FL 33772 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>S</b><br>ADAMSON, WENDY<br>2209 PALMETTO SY<br>CLEARWATER, FL 33765 <input checked="" type="checkbox"/> Delete        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>V-P</b><br>ANNE DE MARLOR<br>1660 GULF BLVD #103<br>CLEARWATER, FL 33764 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>FVP</b><br>BLUMENCRANZ, BRETT<br>3052 ASHLAND TERR<br>CLEARWATER, FL 33761 <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>TREASURER</b><br>EVAN FRAYMAN<br>218 HIGHLAND WOODS DR.<br>SAFTY HARBOR, FL 34695 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>SECRETARY</b><br>WARREN PANDORF<br>2951 Chancery LN<br>CLEARWATER, FL 33759 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |

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.

SIGNATURE: E Greiter Date June 7, 2007 Daytime Phone # 7275315829

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR