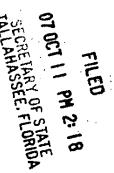




900110460439

10/11/07--01023--007 \*\*35.00



## **COVER LETTER**

TO:	Amendme Division of	ent Section of Corporations						
SUBJ	ECT:	•	B'NAI ISRAE					
		(Na	me of Corporatio	n) .				
DOC	UMENT N	UMBER:	763353					
The e	nclosed Stat	ement of Change of Register	ed Office/Agent a	and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:								
ROBERT MINTZ								
	(Name of Contact Person)							
TEMPLE B'NAI ISRAEL								
(Firm/Company)								
	1685 SOUTH BELCHER ROAD							
	(Address)							
			,					
		CLEARWATER	FLORIDA	33764				
		(City	/State and Zip Co	ode)				
For further information concerning this matter, please call:								
,		ROBERT MINTZ	at (	727 799-3331 EXT. 15 area Code & Daytime Telephone Number				
	()	lame of Contact Person)	(A	rea Code & Daytime Telephone Number				
Encic	sed is a \$35	.00 check made payable to the	ne Department of	State.				
		Mailing Address:		Street Address:				
		Mailing Address: Amendment Section		Amendment Section				
		Division of Corpora		Division of Corporations				
	•	P.O. Box 6327		Clifton Building				

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	nge is submitted for	a corporation organi	2, 607.1508, or 617.1508, Florida S ized under the laws of the State of <u></u> red agent, or both, in the State of Fl	FLORIDA			
1. The name of th	ne corporation:	TEMPLE B'NAI IS	RAEL TNC.				
	TEMPLE B'NAI ISRAEL TOC.  The principal office address: 1685 SOUTH BELCHER ROAD, CLEARWATER, FLORIDA 33764						
3. The mailing ac	ddress (if different):						
4. Date of incorp	oration/qualificatio	n: 5/18/1982	Document number: 763353				
5. The name and Florida Depart		e current registered a	gent and registered office on file wit	h the			
ERIC G. REITER							
	1685 SOUTH BELCHER ROAD						
	CLEAR	WATER, FLORID	A 33764	AHAS AHAS			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):							
	ROBERT MINTZ						
	1685 S	OUTH BELCHER	ROAD	•			
		(P.O. Box NOT acceptable)		-			
	CLEAR	WATER, FLORID	OA 33764	_			
The street addre	ss of its registered be identical.	office and the street	address of the business office of it	s registered agent,			
Such change va authorized by th	is authorized by re-	solution duly adopted poration has been no	d by its board of directors or by an tified in writing of the change.	officer so			
	11/		BRUCE LEVINE, PRESIDEN				
I hereby accept I further agree t of my duties, an document is bei	to comply with the d I am familiar wii ng filed merely to i	e magistaned agant or	Printed or typed name and agree to act in this capacity, utes relative to the proper and con igation of my position as registere e registered office address, I herei.				
(Sig	glature of Registered Age	ent)	10 - 8 - 0 <del>7</del> (Date)				
If signing on be	half of an entity:						
	T MINT 2	<u>'-</u>					
	Y MINT 2  Typed or Printed Name)	<u>'-</u>					

\* \* \* FILING FEE: \$35.00 \* \* \*