2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 26, 2011
Secretary of State

DOCUMENT# N02000000046

Entity Name: TEMPLE SHIR SHALOM OF OVIEDO, INC.

Current Principal Place of Business:

1395 CAMPUS VIEW CT
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 623182
OVIEDO, FL 32762

New Mailing Address:

FEI Number: 01-0556794 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NAGER, SAMUEL
315 HAZELNUT STREET
WINTER SPRINGS, FL 32708 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: T
Name: BARONOFF, STEPHEN
Address: P.O. BOX 623182
City-St-Zip: OVIEDO, FL 32765

Title: VD
Name: COOPER, TOM
Address: P.O. BOX 623182
City-St-Zip: OVIEDO, FL 32765

Title: VD
Name: SHERMAN, AARON
Address: P.O. BOX 623182
City-St-Zip: OVIEDO, FL 32765

Title: SD
Name: HALL, JENNIFER
Address: P.O. BOX 623182
City-St-Zip: OVIEDO, FL 32765

Title: PD
Name: NAGER, SAM
Address: P.O. BOX 623182
City-St-Zip: OVIEDO, FL 32765

Title: TD
Name: SONNENSCHEIN, MICHAEL
Address: P.O. BOX 623182
City-St-Zip: OVIEDO, FL 32765

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL SONNENSCHEIN TD 05/26/2011

Electronic Signature of Signing Officer or Director — Date