2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# N03000007494

Entity Name: THE HEBREW ACADEMY OF PALM BEACH, INC.

Current Principal Place of Business:

120 NORTH COUNTY ROAD
PALM BEACH, FL 33480 US

New Principal Place of Business:

Current Mailing Address:

120 NORTH COUNTY ROAD
PALM BEACH, FL 33480 US

New Mailing Address:

P.O. BOX 91
PALM BEACH, FL 33480 US

FEI Number: 20-1059906 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOHL, BENJAMIN J
120 NORTH COUNTY ROAD
PALM BEACH, FL 33480 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: D ( ) Delete
Name: WOHL, BENJAMIN J
Address: P.O. BOX 1031
City-St-Zip: PALM BEACH, FL 33480 US

Title: D ( ) Delete
Name: WOHL, ELYS B
Address: P.O. BOX 1031
City-St-Zip: PALM BEACH, FL 33480 US

Title: D ( ) Delete
Name: SCHEINER, MOSHE E RABBAI
Address: 120 NORTH COUNTY ROAD
City-St-Zip: PALM BEACH, FL 33480 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: WOHL, BENJAMIN J
Address: P.O. BOX 91
City-St-Zip: PALM BEACH, FL 33480 US

Title: D (X) Change ( ) Addition
Name: WOHL, ELYS B
Address: P.O. BOX 91
City-St-Zip: PALM BEACH, FL 33480 US

Title: D (X) Change ( ) Addition
Name: SCHEINER, MOSHE E RABBI
Address: 120 NORTH COUNTY ROAD
City-St-Zip: PALM BEACH, FL 33480 US

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: BENJAMIN WOHL DIR. 04/30/2004

Electronic Signature of Signing Officer or Director — Date