

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008288

FILED
Apr 08, 2005
Secretary of State

Entity Name: TEMPLE BETH CHAI INC.

Current Principal Place of Business:

5874 NW 123 AVE.
CORAL SPRINGS, FL 33076

New Principal Place of Business:

Current Mailing Address:

5874 NW 123 AVE.
CORAL SPRINGS, FL 33076

New Mailing Address:

FEI Number: 54-2127586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, JONATHAN S
5874 NW 123 AVE.
CORAL SPRINGS, FL FL 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: KAPLAN, JONATHAN S
Address: 5874 NW 123 AVE.
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D () Delete
Name: KAPLAN, LORI
Address: 5874 NW 123 AVE.
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D () Delete
Name: POLLOCK, TERRI
Address: 6722 NW 63 WAY
City-St-Zip: PARKLAND, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JONATHAN KAPLAN

MR.

04/08/2005

Electronic Signature of Signing Officer or Director

Date