## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

**SIGNATURI** 

N03102

(3)

## CONGREGATION B'NAI ISRAEL OF BOCA RATON, INC.

Principal Place	of Business	Mailing Address					T TREATHER ON BORDE TITLE HEALT BOTH THEY BEEN BYON BIRTH	iF1
2200 YAMATO F BOCA RATON F		2200 YAMATO ROAD BOCA RATON FL 33431-4325						
							3. Date incorporated or Qualified 05/16/1984 3a. Date of Last Report 02/26/1996	
2. Principal Pl 21	ace of Business	2a. Mailin 26	g Address				4. FEI Number Applied Fo	$\neg \neg$
Suite, Apt. i	#, etc.	Suite,	Apt. #, etc.				5. Certificate of Status Desired Fee Required	ùl.
City & State		City & 28	State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip	¬ '				8. This corporation has liability for intangible tax under s. 199.03: Florida Statutes	2,
24[	9. Name and Address of Currer		Agent	1301		******	10. Name and Address of New Registered Agent	
	••				81	Name	· · · · · · · · · · · · · · · · · · ·	$\exists$
KANTOR	DAVID				62	Ctroot Ad	titions (B.O. Bay Mymbos in Net Associable)	
2200 YAMATO ROAD					82 Street Address (P.O. Box Number is Not Acceptable)			
BOCA RATON FL 33431					83			
					84	City	FL 85 Zip Code	$\neg$
office or re	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida, Suc	th change was	authorizad	d hv	the corpor	orporation submits this statement for the purpose of changing its register ration's board of directors. I hereby accept the appointment as register	ed ed
SIGNATURE								
	Signature, typed or printed name of registered ag				d Age	nt eignature req	quirad when reinstating) DATE	
12.		D DIRECTORS	DELETE	13.	T. C		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD Kalfus, Melvin		T DEFEIG	1.1 (1)		İ	Fi sugge Fi wa	ווטווונ
NAME STREET ADDRESS	6804 VIA REGINA			12 N/		ADDRESS		
CITY-ST-ZIP	BOCA RATON FL				TY-S1			
TITLE	VD	<del> </del>	DELETE	2.1 1		1-211	Change Adx	dition
NAME	WEINTRAUB, PETER			22 N	AME		_ · -	
STREET ADDRESS	21146 SHADY VISTA LANE			23 S	REET	ADDRESS		
CITY - ST - ZIP	BOCA RATON FL			2.40	ITY-S	T-ZIP		l
TITLE	VD		DELETE	3.1 71	TLE		☐ Change ☐ Add	dition
NAME	FUTERANM PHYLLIS			3.2 N	AME			
STREET ADDRESS	2727 S OCEAN BLVD			3.3 S	REET.	ADDRESS		
CITY-ST-ZIP	HIGHLAND BEACH FL			_	ITY-S	T- ZIP		
TITLE	VD		DELETE	4.1 TI		-	Change Add	ition
NAME	GORDON, HARVEY			4.2 N				
STREET ADDRESS	955 EVE STREET DELRAY BEACH FL					ADORESS	,	
CITY-ST-ZIP TITLE	VD VD		DELETE	4.4 CI 5.1 TI	TIE	I - ZIP	☐ Change ☐ Adv	dition
NAME	WEINTRAUB, TONI			5.2 N			Commys L. Au	
STREET ADDRESS	21146 SHADY VISTA LANE					ADDRESS	•	
CITY-ST-ZIP	BOCA RATON FL			5.4 CI				1
TIFLE	Tak		DELETE	6.1 TI			T Change ☐ Ado	dition
NAME	ZOBEL POBERT			62 N	AME		Leslie Reamer	- 1
STREET ADDRESS	4481 WOODFIELD BLVD			6.3 \$1	TREET.	ADORESS		1
CITY-ST-ZIP	BOCA RATON FL			6.4 CI	TY-\$1	r- ZIP	2652 N.W. 46th Street 33434	
14. I do hereb	by certify that the information supplies in indicated on this applial report or	d with this filing	does not qua	lify for the	exe	nption state	te <b>d Desa</b> tio <b>RAID(7/</b> 3)(i <b>)</b> Borida Statutes. I further certify that the hat my signature shall have the same legal effect as if made under oath	that
I am an of	flicer or director of the corporation on Block 12 or Block 13 if changed, or	r the receiver o	r trustee empor	wered to e	xec	ute this rep	port as required by Chapter 617, Florida Statutes; and that my name	, 1. 1011