

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 04, 2007
Secretary of State**

DOCUMENT# N04000009705

Entity Name: TEMPLE KOL AMI EMANU-EL FOUNDATION, INC.

Current Principal Place of Business:

8200 PETERS ROAD
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

8200 PETERS ROAD
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 20-1836125 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHN, ALAN B
100 W. CYPRESS CREEK ROAD
700
FT. LAUDERDALE, FL 33309 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: MICHAELS, DIANE
Address: 8200 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: HAGER, LEE
Address: 8200 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: GOODMAN, STANLEY
Address: 8200 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

Title: DC () Delete
Name: COLMAN, ROBERT
Address: 8200 PETERS ROAD
City-St-Zip: PLANTATION, FL 33324

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:

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 Chapter 119, 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: ROBERT COLMAN

DC

01/04/2007

Electronic Signature of Signing Officer or Director

_____ Date