

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 18, 2004 8:00 am**  
**Secretary of State**

02-18-2004 90001 036 \*\*\*\*61.25

**DOCUMENT # N09562**

1. Entity Name

TEMPLE BETH AMI OF PALM BEACH COUNTY, INC.



Principal Place of Business

1401 N.W. FOURTH AVENUE  
BOCA RATON FL 33432

Mailing Address

1401 N.W. FOURTH AVENUE  
BOCA RATON FL 33432

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-2568825

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JRYJUB, KAWREBCE E  
10995 WATER OAK MANOR  
BOCA RATON FL 33498

Name

Lawrence E Krutin

Street Address (P.O. Box Number is Not Acceptable)

10995 Water Oak Manor

City

Boca Raton

FL

Zip Code

33498

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*James E. Krutin*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

5 FEBRUARY 04

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PT ☐ Delete  
NAME KRUKIN, LAWRENCE E  
STREET ADDRESS 10995 WATER OAK MANOR  
CITY-ST-ZIP BOCA RATON FL 33498

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE EVPT ☐ Delete  
NAME ROSENBERG, MARVIN  
STREET ADDRESS 22324 COLLINGTON DRIVE  
CITY-ST-ZIP BOCA RATON FL 33428

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 8046 Via Grande  
CITY-ST-ZIP Boynton Beach, FL 33437

TITLE TFVP ☐ Delete  
NAME MEISTER, IRWIN  
STREET ADDRESS 20008 RIMA CIRCLE  
CITY-ST-ZIP BOCA RATON FL 33434

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☒ Delete  
NAME SACHAROW, HELENE  
STREET ADDRESS 2560 RIVIERA DR  
CITY-ST-ZIP DELRAY BCH FL 33445

TITLE ☐ Change ☒ Addition  
NAME Second Vice President  
STREET ADDRESS Jerome Miller  
CITY-ST-ZIP 6092 Golf Villas Drive  
Boynton Beach FL 33437

TITLE ☐ Delete  
NAME SACHAROW, HELENE  
STREET ADDRESS 2560 RIVIERA DRIVE  
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TFS ☐ Delete  
NAME BLUMENTHAL, NORMAN  
STREET ADDRESS 7717 MONARCH CT  
CITY-ST-ZIP DELRAY BEACH FL 33446

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*James E. Krutin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5 FEBRUARY 04

Date

351-347-003

Daytime Phone #