

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

**FILED**  
**May 05, 2004 8:00 am**  
**Secretary of State**

05-05-2004 90241 040 \*\*\*\*61.25

**DOCUMENT # N17466**

1. Entity Name

TEMPLE ADATH OR, INC.



Principal Place of Business

10400 GRIFFIN ROAD  
#302  
FT. LAUDERDALE FL 33328  
US

Mailing Address

10400 GRIFFIN ROAD  
#302  
FT. LAUDERDALE FL 33328  
US

14022111



MOORE CR2E037 (11/03)

2. Principal Place of Business

4598 Griffin Rd  
Suite, Apt. #, etc.  
Cooper City, FL  
City & State  
33328

3. Mailing Address

2701 N. HIATUS RD  
Suite, Apt. #, etc.  
Cooper City, FL  
City & State  
33026

Zip

Country

USA

Zip

Country

USA

4. FEI Number

59-2740747

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ROSS, FLORENCE  
4401 QUEEN PALM LANE  
TAMARAC FL 33319

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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

T  
TITLE NAME FIRESTONE, NOLA  Delete  
STREET ADDRESS 10414 BERMUDA DR:  
CITY-ST-ZIP COOPER CITY FL 33026

V  
TITLE NAME JOSEPH, ILENE  Delete  
STREET ADDRESS 3800 N. HILLS DR. #109  
CITY-ST-ZIP HOLLYWOOD FL 33021

PD  
TITLE NAME ROSS, FLORENCE  Delete  
STREET ADDRESS 4401 QUEEN PALM LANE  
CITY-ST-ZIP TAMARAC FL 33319

D  
TITLE NAME GALLAND, FRED  Delete  
STREET ADDRESS 6685 WOODBRIDGE DR  
CITY-ST-ZIP BOCA RATON FL 33434

Delete

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

Change  Addition

Change  Addition

Change  Addition

Change  Addition

Change  Addition

Change  Addition

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: *Florence Ross* FLORENCE ROSS

#28/04

Date

954-252-1313

Daytime Phone #