## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State ( ...
DIVISION OF CORPORATIONS

DOCUMENT #

N30928

(8)

## CONGREGATION KOL AMI OF PALM BEACH COUNTY, INC.

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Principal Place of Business Mailing Address							
1 71 N. FEDERAL HIGHWAY P.O. BOX 970234							
BOCA RATON FL 33432 BOCA RATON FL 33497-0234			4				
US		US			3. Date Incorporated or Qualified	3a. Date of Last Report	
1					03/01/1989	02/12/1996	
2. Principal P	Piace of Business	2a. Mailing Address		4. FEI Number	Applied For		
21		26		65-0260700	Not Applicable		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional		
22		27			Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5,00 May Be		
Zip   Country		Zip Country		Trust Fund Contribution	Added to Fees		
24		<b>├</b> '	30		8. This corporation has liability for in	ntangible tax under s. 199.032, Yes : No	
24	25 25 9. Name and Address of Current		30		10. Name and Address of New Re		
•			81	Name		,	
KLEINMAN, HENRY							
	ERRA TERR W.		82	Street	Address (P.O. Box Number is Not Acceptab	10)	
	ATON FL 33433		83	<del> </del>			
ו אסטא וי	ATORTE 30403			<u> </u>			
			84	City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 617.050.	2 and 617.1508, Florida Statutes	s, the above	e-namec	d corporation submits this statement for the p	urpose of changing its registered	
l office or r	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was au	uthorized by	/ the cor	poration's board of directors. I hereby accept	t the appointment as registered	
	and describe the state of the design	anono or, cooligir (17.0000, 110)	ida Olaidio				
SIGNATURE	Signature, typed or printed name of registered age	ent and title il applicable. (NOTE:	Registered Age	enl signatur	e required when reinstating)	DATE	
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFIC		
TITLÉ	D	☐ DELETE	1.1 TITLE			Change Addition	
NAME	WERNER, PAUL		1,2 NAME				
STREET ADDRESS	222144 VERBINA WAY		1.3 STREET	ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - S	ST-ZIP			
TATLE	P	DELETE	2.1 TITLE		DIP KLEINMAN, HENRY 7671 SIERRA TERR.	Change Addition	
NAME	KLEINMAN, HENRY		2.2 NAME		RLEINMAN, HENRY	1	
STREET ADDRESS	7671 SIERRA TERR W		23 STREET	ADDRESS	7671 SIERRA TERR.	23,42=	
CITY-ST-ZIP	BOCA RATON FL		2. 4 CITY-	SI-ZIP	BOCA RATON, FL	3 3 9 3 3	
TITLE	D	DELETE	3.1 TITLE			Change Addition	
NAME	OSTROWSKI, JOSHUA		3.2 NAME				
STREET ADDRESS	8425 BOCA RIO DRIVE		3.3 STREET			•	
CITY-ST-ZIP	BOCA RATON FL 33433	NT NEITE	3.4 CITY-1	ST-ZIP	ļ	- 1 Charles	
TITLE	P OADTED OUADON	DELETE .	4.1 TITLE			☐ Change ☐ Addition	
NAME	CARTER, SHARON		4. 2 NAME		<	Va /2/20/00	
STREET ADDRESS	8935 SONOMA LAKES BLVD		4.3 STREET			111 41141	
CITY-ST-ZIP	BOCA RATON FL 33434	NO DELETE	4.4 CITY - S		ļ	7	
TITLE	014744 000007	DELETE	5.1 TITLE			☐ Change ☐ Addition.	
NAME	SULTAN, ROBERT		5.2 NAME	•	50000221	ひで作り	
STREET ADDRESS	22138 FLOWER DR		5.3 STREET	1	-06/20/970108	ibU34	
CITY-ST-ZIP	BOCA RATON FL	Dr. Fre	5.4 CITY - 9	ST - Z(P	***61.25	TOP ALLES	
TITLE	V	DELETE	6.1 ₹(TL€		D	Change Addition	
NAME	TACK, NANCY		6.2 NAME		TACK, NANCY		
STREET ADDRESS	2911 NW 29TH AVE						
CITY-ST-7IP	I ROCA RATON FI		64 CITY - S	T - 71P	ROLA DATOM FL		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on in attachment with an address.

(11)260

**FILED** 

Jun 20 1997 8:00am

Secretary of State