

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90092 018 ****61.25

DOCUMENT # N30928

1. Entity Name

CONGREGATION KOL AMI OF PALM BEACH COUNTY, INC.

Principal Place of Business

71 N. FEDERAL HIGHWAY
BOCA RATON FL 33432
US

Mailing Address

P.O. BOX 970234
BOCA RATON FL 33497-0734
US

U 2 1 4 3 4



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0260700

Applied For

Not Applicable

Zip

Country

Zip

Country

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

KLEINMAN, HENRY
7671 SIERRA TERR W.
BOCA RATON FL 33433

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☒ Delete
NAME	HOLLAND, DONNA	
STREET ADDRESS	4895 REGENCY COURT	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	DP	☐ Delete
NAME	KLEINMAN, HENRY	
STREET ADDRESS	7671 SIERRA TERR. W	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	DS	☒ Delete
NAME	WERNER, ANITA	
STREET ADDRESS	22144 VERBENA WAY	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	DT	☐ Delete
NAME	BENDIK, EDWARD	
STREET ADDRESS	19626 BLACK OLIVE DR	
CITY-ST-ZIP	BOCA RATON FL 33498	
TITLE	DV	☒ Delete
NAME	SHUTER, MELVIN	
STREET ADDRESS	10792 RIVER GLEN DR	
CITY-ST-ZIP	BOCA RATON FL 33428	
TITLE	D	☐ Delete
NAME	BRONFMAN, ELLIOT	
STREET ADDRESS	5130 LAS VERDES CIR	
CITY-ST-ZIP	DELRAY BEACH FL	

TITLE	DP	☐ Change ☒ Addition
NAME	JEFF BONAR	
STREET ADDRESS	702 Lakeshore Dr	
CITY-ST-ZIP	DELRAY Beach FL 33444	
TITLE	D	☐ Change ☒ Addition
NAME	BLAINE HOLLANDER	
STREET ADDRESS	17031 BOCA CLUB BLVD	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	D	☐ Change ☒ Addition
NAME	AL SAMLIN	
STREET ADDRESS	1092 WESTBURY H	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	D	☐ Change ☒ Addition
NAME	ARTIE SCHWARTZ	
STREET ADDRESS	6372 LA COSTA DR # 705	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE	D	☐ Change ☒ Addition
NAME	JACOB EVER	
STREET ADDRESS	6773 PORTSIDE DR	
CITY-ST-ZIP	BOCA RATON FL 33496	
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)