2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33404

FILED Mar 17, 2009 Secretary of State

Entity Name: TEMPLE ISRAEL OF WEST PALM BEACH, INC.

Current Principal Place of Business: New Principal Place of Business: 1901 N. FLAGLER DR. WEST PALM BEACH, FL 33407 **Current Mailing Address: New Mailing Address:** 4 HARVARD CIRCLE 1901 N. FLAGLER DR. WEST PALM BEACH, FL 33407 STE. 600 WEST PALM BEACH, FL 33409 US FEI Number: 59-0696295 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SOLOMAN, LINDA 1901 N. FLÄGLER DR. WEST PALM BEACH, FL 33407 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DVP () Delete () Change () Addition BAUM, LORA Name: Name: 1901 N FLAGLER DR Address: Address: City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: Title: () Delete Title: (X) Change () Addition LEOPOLD, ROSLYN Name: WEISSMAN, FRED Name: Address: 1901 N FLAGLER DR Address: 1901 N FLAGLER DR City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: WEST PALM BEACH, FL 33407 Title: () Delete Title: () Change () Addition NEWMAN, SCOTT Name: Name: 1901 N. FLAGLER DR Address: Address: City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: Title: DVP () Delete Title: () Change () Addition Name: GELFAND, MICHAEL Name: Address: 1901 N FLAGLER DR Address: City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: Title: () Delete Title: () Change () Addition EISENBERG, GEORGENE Name: Name: 1901 N. FLAGLER DR. Address: Address: City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: Title: () Delete Title: () Change () Addition SCHWARTZ, STEPHEN Name: Name: Address: 1901 N. FLAGLER Address: PALM BEACH GARDENS, FL 33418 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: FRED WEISSMAN P 03/17/2009