

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
96 MAR 28 PM 12:4
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000003917 (1)

1. Corporation Name
CONGREGATION BETH ADAM, INC.



Principal Place of Business: P.O. BOX 2579 BOCA RATON FL 33427
Mailing Address: P.O. BOX 2579 BOCA RATON FL 33427

3. Date Incorporated or Qualified: 08/09/1994
3a. Date of Last Report: 03/23/1995

2. Principal Place of Business (21-24)
2a. Mailing Address (26-30)
22. Suite, Apt. #, etc.
23. City & State
24. Zip, Country

4. FEI Number: 65-0524131
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
SAUL, B.J.
8236 D. SEVERN DRIVE
BOCA RATON FL 33433

10. Name and Address of New Registered Agent
81 Name: Saul, B.J.
82 Street Address: 11194 Harbour Springs Circle
83
84 City: Boca Raton FL 85 Zip Code: 33428

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature is required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		
TITLE	D SAUL, B.J.	<input type="checkbox"/> DELETE
NAME	SAUL, B.J.	
STREET ADDRESS	8236 D. SEVERN DR.	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	D LEANDER, HANS	<input type="checkbox"/> DELETE
NAME	LEANDER, HANS	
STREET ADDRESS	22521 S.W. 66TH AVE., APT. 203	
CITY-ST-ZIP	BOCA RATON FL 33428	
TITLE	D KOTCH, MARTIN L	<input checked="" type="checkbox"/> DELETE
NAME	KOTCH, MARTIN L	
STREET ADDRESS	32900 EVERGREEN ROAD	
CITY-ST-ZIP	BIRMINGHAM MI 48025	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Roni Hirsch	
1.3 STREET ADDRESS	6311 N.W. 33rd Ave	
1.4 CITY-ST-ZIP	Boca Raton, FL 33496	
2.1 TITLE	Vice Pres	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Leimer, Hans	
2.3 STREET ADDRESS	22521 S.W. 66th Ave Apt 407	
2.4 CITY-ST-ZIP	Boca Raton FL 33428	
3.1 TITLE	Saul, BJ TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Saul, BJ	
3.3 STREET ADDRESS	11194 Harbour Springs Circle	
3.4 CITY-ST-ZIP	Boca Raton, FL 33428	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 an attachment with an address.

SIGNATURE: B.J. Saul DATE: 2/5/96 DAYTIME PHONE #: (407) 477-0459

CR2E037 (12/95)