## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE

## FILED Feb 25, 2008 08:00 AN Secretary of State DOCUMENT # N94000006105 1. Entity Name THE TEMPLE SINAI FOUNDATION, INC. Principal Place of Business Mailing Address 18801 NE 22ND AVE 18801 NE 22ND AVE N MIAMI BEACH FL 33180 N MIAMI BEACH FL 33180 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 1st MOORE · CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 65-0558169 Not Applicable Zip Country Ζıp Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GORDON, HOWARD W Street Address (P.O. Box Number is Not Acceptable) 18801 NE 22ND AVE NORTH MIAMI BEACH FL 33180 City Zip Code 6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typod or grinted name of registered agent and title if approache. (NOTE: Registered Agent signature registed when reinstating) CATE gall, jala, néstret et je FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Florida Department of State Due By May 1, 2008 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE Change ☐ Addition SILVERMAN, BARBARA NAME NAME 20941 NE 21ST AVE STREET ADDRESS STREET ADDRESS U000000839610 NORTH MIAMI BEACH FL CITY-ST-ZIP CITY-ST-ZiP TITLE Delete TITLE Addition GORDON, HOWARD W NAME NAME 2035 NE 201ST TER STREET ADDRESS STREET ADDRESS NORTH MIAMI BEACH FL 33179 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete DIE Change Addition NAME SLAVIN, DICK NAME 3000 ISLAND BLVD TH-3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP AVENTURA FL 33160 CITY-ST-ZIP DLOC TITLE ☐ Delete TITLE ☐ Change Addition LOCKSHIN, DONALD NAME MAME STREET ADDRESS 20231 W OAKHAVEN CIR STREET ADDRESS CITY-ST-ZIP N MIAMI BEACH FL 33179 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition GLICKMAN, ROSE ELLEN NAME NAME 8159 S. SAVANNAH CIR. STRUET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33328 CITY-ST-ZIP CITY-ST-ZiP TITLE ☐ Delete THE Change Addition NAME NAME STREET ADDRESS STRLET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 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