## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000004010

City-St-Zip: VERO BEACH, FL 32968

Entity Name: CONGREGATION BINALEMET INC

FILED Jan 09, 2008 Secretary of State

Entity Name: CONGREGATION BINALEMET, INC.					
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	HSTREET ACH, FL 3296	0			
Current Mailing Address:			New Mailing Address:		
3076 12TH STREET VERO BEACH, FL 32960			1151 INDIAN MOUND TRAIL VERO BEACH, FL 32963		
FEI Number	: 65-0851382	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	SA E AN MOUND TI ACH, FL 3296				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Age			ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) ZWERNER, JO 475 45TH COU VERO BEACH,	RT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DV ( LAZAN, LISA E 1151 INDIAN M VERO BEACH,	OUND TRAIL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DT ( ZWERNER, JC 475 45TH COU VERO BEACH,	RT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	SCHLAMOWIT.	) Delete Z, ROBERT E SOUTHWEST	Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: LISA E. LAZAN D 01/09/2008