## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000006040

Entity Name: TEMPLE OHEV SHALOM, INC.

FILED Apr 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6460 TAMPA PALMS BLVD. TAMPA, FL 33647

Current Mailing Address: New Mailing Address:

P.O. BOX 46155 TAMPA, FL 336460102

FEI Number: 59-3538955 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:

WEISSMAN, MARK S 17316 CHENANGO LANE TAMPA, FL 33647 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:

itle: D ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 WEISSMAN, MARK S
 Name:
 ROTHFARB, STEVE

 Address:
 17316 CHENAGO LANE
 Address:
 7226 YARDLEY WAY

 City-St-Zip:
 TAMPA, FL 33647
 City-St-Zip:
 TAMPA, FL 33647

Title: VPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FOUST, MADELINE DR
 Name:

 Address:
 4925 EBENSBURG DR
 Address:

 City-St-Zip:
 TAMPA, FL 33647
 City-St-Zip:

 Name:
 GELLER, HELENE
 Name:
 GELLER, HELENE

 Address:
 7129 WAREHAM DR.
 Address:
 7129 WAREHAM DR.

 City-St-Zip:
 TAMPA, FL 33647
 City-St-Zip:
 TAMPA, FL 33647

Title: TD ( ) Delete Title: SD (X) Change ( ) Addition

Name: SHERMAN, DIANE Name: ROSENBLUM, MICHAEL
Address: 1728 CYPRESS CREEK RD Address: 17347 EMERALD CHASE DRIVE

City-St-Zip: LUTZ, FL 33559 City-St-Zip: TAMPA, FL 33647

Title: PD () Delete Title: D (X) Change () Addition

 Name:
 MAURER, CRAIG
 Name:
 WEISSMAN, MARK

 Address:
 9466 HUNTERS POND DR.
 Address:
 17316 CHENANGO LANE

 City-St-Zip:
 TAMPA, FL 33647
 City-St-Zip:
 TAMPA, FL 33647

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: HELENE GELLER TREA 04/27/2008