## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000001250

Entity Name: YOUNG ISRAEL OF BAL HARBOUR INC.

FILED Jan 24, 2004 Secretary of State

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

**%MARTY PATRICK** PO BOX 545985 1141 KANE CONCOURSE SURFSIDE, FL 33154 BAY HARBOR ISLANDS, FL 33154

New Mailing Address: **Current Mailing Address:** 

**%MARTY PATRICK** PO BOX 545985 1141 KANE CONCOURSE SURFSIDE, FL 33154 BAY HARBOR ISLANDS, FL 33154

FEI Number: 13-5611758 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:

PATRICK, MARTY 1141 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154 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

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

(X) Change ( ) Addition () Delete KWIAT, DAVID COURTNEY, DANIEL Name: Name: 10185 COLLINS AVE 808 Address: 8918 FROUDE AVENUE Address:

SURFSIDE, FL 33154 City-St-Zip: BAL HARBOUR, FL 33154 City-St-Zip:

Title: Title: SEC (X) Change ( ) Addition () Delete Name: BRUM, LEON Name: KWIAT, DAVID

Address: 1141 KANE CONCOURSE Address: 10185 COLLINS AVENUE

City-St-Zip: BAY HARBOR ISLANDS, FL 33154 City-St-Zip: BAL HARBOUR, FL 33154

Title: () Delete Title: V. P (X) Change ( ) Addition ENGELSTEIN, HAROLD SUSSMAN, JOEL Name: Name:

Address: 1141 KANE CONCOURSE Address: PO BOX 545985 City-St-Zip: BAY HARBOR ISLANDS, FL 33154 City-St-Zip: SURFSIDE, FL 33154

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

Name: SENKER, JOSEPH Name: 8958 GARLAND AVE Address: Address: City-St-Zip: SURFSIDE, FL 33154 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSEPH SENKER Т 01/24/2004