

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711527

Entity Name: TEMPLE SHALOM, INC.

Current Principal Place of Business:

4630 PINE RIDGE RD
NAPLES, FL 34119-4063

Current Mailing Address:

4630 PINE RIDGE RD
NAPLES, FL 34119-4063 US

FEI Number: 59-2546855

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEBORAH , FIDEL
4630 PINE RIDGE RD.
NAPLES, FL 34119 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: DEBORAH FIDEL

04/22/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title FINANCIAL SECRETARY
Name PINO, STEPHEN
Address 3410 CREEKVIEW DRIVE
City-State-Zip: BONITA SPRINGS FL 34134

Title TREASURER
Name RITTER, SUSAN
Address 27241 IBIS COVE COURT
City-State-Zip: BONITA SPRINGS FL 34134

Title 1ST VICE PRESIDENT
Name KAUFMAN, EDWARD
Address 801 SPYGLASS LANE
City-State-Zip: NAPLES FL 34102

Title PRESIDENT
Name SISSMAN, DARYL
Address 575 WHISPERING PINE LANE
City-State-Zip: NAPLES FL 34103

Title EXECUTIVE DIRECTOR
Name FIDEL, DEBORAH
Address 554 AVELLINO ISLES CIR
13101
City-State-Zip: NAPLES FL 34119

Title 2ND VICE PRESIDENT
Name HASSENFELD, MERRILL
Address 5550 HERON POINT DRIVE
#601
City-State-Zip: NAPLES FL 34108

Title RECORDING SECRETARY
Name MINTZ, ROBIN
Address 5938 HAMMOCK ISLES CIRCLE
City-State-Zip: NAPLES FL 34119

Title 3RD VICE PRESIDENT
Name TEITELBAUM, LEONARD
Address 4401 GULFSHORE BLVD N
702
City-State-Zip: NAPLES FL 34103

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I hereby 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 all other like empowered.

SIGNATURE: DEBORAH FIDEL

ED

04/22/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SISTERHOOD PRESIDENT
Name DRUCKMAN, BARBARA
Address 23803 AMALFI COAST RD
City-State-Zip: BONITA SPRINGS FL 34135