

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750602

**FILED  
Mar 18, 2020  
Secretary of State  
1709639703CC**

**Entity Name:** TEMPLE BETH OR, INC.

**Current Principal Place of Business:**

11715 S.W. 87TH AVE.  
MIAMI, FL 33176

**Current Mailing Address:**

11715 SW 87TH AVE  
MIAMI, FL 33176 US

**FEI Number:** 59-2075317

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GAMMON, MARTI H  
11715 S.W. 87TH AVE.  
MIAMI, FL 33176 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

**Officer/Director Detail :**

Title D  
Name TENEN, MEL  
Address 11715 S.W. 87TH AVE.  
City-State-Zip: MIAMI FL 33176

Title D  
Name HECHTMAN, ILIEN  
Address 11715 S.W. 87TH AVE.  
City-State-Zip: MIAMI FL 33176

Title T  
Name GAMMON, MARTI  
Address 11715 S.W. 87TH AVE.  
City-State-Zip: MIAMI FL 33176

Title D  
Name KATZ, ANNETTE  
Address 11715 S.W. 87TH AVE.  
City-State-Zip: MIAMI FL 33176

Title D  
Name LORING, ANDREA  
Address 11715 S.W. 87TH AVE.  
City-State-Zip: MIAMI FL 33176

Title S  
Name EMERSON, GEORGE  
Address 11715 S.W. 87TH AVE.  
City-State-Zip: MIAMI FL 33176

*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:** MARTI H. GAMMON

**TREASURER**

**03/18/2020**

Electronic Signature of Signing Officer/Director Detail

Date