

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03102

**Entity Name:** CONGREGATION B'NAI ISRAEL OF BOCA RATON, INC.

**Current Principal Place of Business:**

2200 YAMATO ROAD  
BOCA RATON, FL 33431-4325

**Current Mailing Address:**

2200 YAMATO ROAD  
BOCA RATON, FL 33431-4325

**FEI Number:** 59-2422860

**Certificate of Status Desired:** No

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

WEINTRAUB, PETER  
2700 N. MILITARY TRAIL  
SUITE 355  
BOCA RATON, FL 33431 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           TREASURER  
Name           CANNON, JEFF  
Address        2200 YAMATO ROAD  
City-State-Zip: BOCA RATON FL 33431-4325

Title           PRESIDENT  
Name           WEINER, GARY  
Address        2200 YAMATO ROAD  
City-State-Zip: BOCA RATON FL 33431-4325

Title           VP  
Name           BLOOM, NEL  
Address        2200 YAMATO ROAD  
City-State-Zip: BOCA RATON FL 33431-4325

Title           VP  
Name           YOUNG, JEFF  
Address        2200 YAMATO ROAD  
City-State-Zip: BOCA RATON FL 33431-4325

Title           SECRETARY  
Name           YOUNG, JEFF  
Address        2200 YAMATO ROAD  
City-State-Zip: BOCA RATON FL 33431-4325

Title           EXECUTIVE DIRECTOR  
Name           WAGMAN, SHARON  
Address        2200 YAMATO ROAD  
City-State-Zip: BOCA RATON FL 33481

*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:** SHARON WAGMAN

**EXECUTIVE DIRECTOR**

**04/14/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date