2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09397

Entity Name: CONGREGATION BETH SHALOM OF COCONUT CREEK, INC.

FILED
Apr 06, 2015
Secretary of State
CC8888832136

Current Principal Place of Business:

1447 LYONS ROAD

COCONUT CREEK, FL 33063

Current Mailing Address:

1447 LYONS ROAD

COCONUT CREEK. FL 33063

FEI Number: 59-2531428 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEGAL, MURIEL 2302 LUCAYA LANE APT. L-4 COCONUT CREEK, FL 33066 US

COCONOT CREEK, TE 33000 OC

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: MURIEL SEGAL 04/06/2015

Electronic Signature of Registered Agent Date

Officer/Director Detail:

TitlePRESIDENTTitleFINANCIAL SECRETERYNameSHAPIRO, ARLINENamePRAGER, SARAH MRS.Address1603 ABACO DR. #K-4Address3502 BIMINI LANE #J2

City-State-Zip: COCONUT CREEK FL 33066 City-State-Zip: COCONUT CREEK FL 33066

Title TREASURER Title V

Name BRUNN, ALBERT J Name RICHMAN, ANNE

Address 2403 ANTIGUA CIRCLE #E-4 Address 3501 BIMINI LANE # A-2
City-State-Zip: COCONUT CREEK FL 33066 City-State-Zip: COCONUT CREEK FL 33066

Title S Title PRESIDENT

Name RUMAC, MORTON Name SEGAL, MURIEL

Address 7300 LAKE CIRCLE DR #302 Address 2302 LUCAYA LANE #L-4

City-State-Zip: COCONUT CREEK FL 33063 City-State-Zip: COCONUT CREEK FL 33066

Title VP

Name NEGRIN, CEIL

Address 2201 LUCAYA BND APT E3
City-State-Zip: COCONUT CREEK FL 33066

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: MURIEL SEGAL PRESIDENT 04/06/2015