# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 16, 2008**
**Secretary of State**

DOCUMENT# N02000004407

**Entity Name:** JEROME A. YAVITZ CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

C/O CYPEN & CYPEN
777 ARTHUR GODFREY RD/SUITE 320
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 402099
MIAMI BEACH, FL 33140

**New Mailing Address:**

**FEI Number: 03-0473333** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CYPEN, STEPHEN H
777 ARTHUR GODFREY ROAD
SUITE 320
MIAMI BEACH, FL 33140 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DVPT ( ) Delete
Name: CYPEN, ARLYN
Address: 777 ARTHUR GODFREY RD.
City-St-Zip: MIAMI BEACH, FL 33140

Title: DPS ( ) Delete
Name: CYPEN, STEPHEN H
Address: 777 ARTHUR GODFREY RD
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete
Name: CYPEN DIAMOND, LESLIE
Address: 777 ARTHUR GODFREY ROAD
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete
Name: CYPEN KAPLAN, JENNIFER
Address: 777 ARTHUR GODFREY RD.
City-St-Zip: MIAMI BEACH, FL 33140

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEPHEN H. CYPEN P 01/16/2008
Electronic Signature of Signing Officer or Director — Date