


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 27, 2007 08:00 A**  
**Secretary of State**

|  |   |
|--|---|
| <b>DOCUMENT # N03000009238</b><br>1. Entity Name<br><b>THE SYLVIA FOUNDATION, INC.</b> |  |
|--|---|

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|--|--|
| Principal Place of Business<br>7789 CHARNEY LANE<br>BOCA RATON, FL 33496 | Mailing Address<br>7789 CHARNEY LANE<br>BOCA RATON, FL 33496 |
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**DO NOT WRITE IN THIS SPACE**



04242007 No Chg-NP CR2E037 (4/06)

|   |                                       |
|---|---------------------------------------|
| 4. FEI Number<br>20-0330436                               | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |

**6. Name and Address of Current Registered Agent**

TABACK, IVAN I ESQ.  
 PROSKAUER ROSE LLP  
 2244 GLADES ROAD ONE BOCA PL STE 340  
 BOCA RATON, FL 33431-7383

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS                     |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>ITZLER, DANIEL<br>7789 CHARNEY LANE<br>BOCA RATON, FL 33496         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>ITZLER, PETER<br>920 S.E. EIGHTH STREET<br>FT LAUDERDALE, FL 33316  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>DRUCKER, JANNA<br>5029 N.W. 107TH AVENUE<br>CORAL SPRINGS, FL 33076 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>LIBERMAN, JILL<br>1220 PARKSIDE AVENUE<br>BOCA RATON, FL 33458      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |

U00000739027  
 05/14/07-80008-009 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Daniel Itzler Daniel Itzler 4/24/07 561-479-1897

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #