

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 24, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # N97000002562

1. Entity Name  
THE DANIEL D. CANTOR FOUNDATION, INC.



Principal Place of Business

8645 BANYAN WAY  
TAMARAC, FL 33321

Mailing Address

8645 BANYAN WAY  
TAMARAC, FL 33321



08042006 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
NOT APPLICABLE

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

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

BERGER, BRUCE M  
517 N.E. 6TH STREET  
FORT LAUDERDALE, FL 33304

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE D  
NAME CANTOR, DANIEL D  
STREET ADDRESS 8645 BANYAN WAY  
CITY-ST-ZIP TAMARAC, FL 33321

TITLE D  
NAME CUTLER, STEVEN W  
STREET ADDRESS 1 E. BROWARD BLVD, STE 1010  
CITY-ST-ZIP FORT LAUDERDALE, FL 33301

TITLE D  
NAME BERGER, BRUCE M  
STREET ADDRESS 517 N.E. 6TH STREET  
CITY-ST-ZIP FORT LAUDERDALE, FL 33304

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/24/2006

Daytime Phone #