2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # N97000003073

1. Entity Name
LITOWITZ FOUNDATION, INC.

Principal Place of Business	Mailing Address
11401 BIRD RD., STE. 370 MIAMI, FL 33165	11401 BIRD RD., STE. 370 MIAMI, FL 33165

01302007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0763609
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DANIELS, NICHOLAS M
ONE SE 3RD AVENUE
STE 2400
MIAMI, FL 33131

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	D
NAME	LITOWITZ, ROBERT
STREET ADDRESS	11401 BIRD RD., STE. 370
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	D
NAME	LITOWITZ, DONNA M
STREET ADDRESS	11401 BIRD RD., STE. 370
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	D
NAME	LITOWITZ, BUDD
STREET ADDRESS	11401 BIRD RD., STE. 370
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	D
NAME	LITOWITZ, SUSAN
STREET ADDRESS	11401 BIRD RD., STE. 370
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	D
NAME	LITOWITZ, ARTHUR
STREET ADDRESS	11401 BIRD RD., STE. 370
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/21/07-80092-023 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: Robert Litowitz ROBERT LITOWITZ, PRES. 2/6/07 305-532-5775
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #