

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004739

FILED
Mar 02, 2009
Secretary of State

Entity Name: THE DAN SELIGMAN FAMILY CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

PO BOX 952948
LAKE MARY, FL 32795

New Principal Place of Business:

469 WOLDUNN CIRCLE
LAKE MARY, FL 32746

Current Mailing Address:

PO BOX 952948
LAKE MARY, FL 32795

New Mailing Address:

FEI Number: 65-0781900 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASARCH, STEVEN J
1900 NW CORPORATE BOULEVARD
SUITE 400 EAST
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

ASARCH, STEVEN J
20283 STATE ROAD 7
SUITE 400
BOCA RATON, FL 33498 US

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

03/02/2009

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SOLOMON, ALLAN B
Address: 2200 NW CORPORATE BLVD, #310
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: SELIGMAN, CYNTHIA
Address: 420 TURNBERRY CIRCLE
City-St-Zip: OXFORD, MS 386552568

Title: DPS () Delete
Name: SELIGMAN, HARRY L
Address: 469 WOLDUNN CIR
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: SELIGMAN, ARLENE
Address: 469 WOLDUNN CIRCLE
City-St-Zip: LAKE MARY, FL 32746

Title: DPS (X) Change () Addition
Name: SELIGMAN, HARRY L
Address: 469 WOLDUNN CIRCLE
City-St-Zip: LAKE MARY, FL 32746

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: HARRY L. SELIGMAN

Electronic Signature of Signing Officer or Director

PRES

03/02/2009

Date