

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004739

FILED  
Mar 08, 2012  
Secretary of State

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

**Current Principal Place of Business:**

469 WOLDUNN CIRCLE  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**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  
20283 STATE ROAD 7  
SUITE 400  
BOCA RATON, FL 33498 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: D  
Name: SOLOMON, ALLAN B  
Address: 2200 NW CORPORATE BLVD, #310  
City-St-Zip: BOCA RATON, FL 33431

Title: D  
Name: SELIGMAN, ARLENE  
Address: 469 WOLDUNN CIRCLE  
City-St-Zip: LAKE MARY, FL 32746

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

I hereby 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 all other like empowered.

SIGNATURE: HARRY L. SELIGMAN

PRES

03/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date