

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90357 035 *****61.25

DOCUMENT # 837640

1. Entity Name

THE LANDEGGER CHARITABLE FOUNDATION, INC.



Principal Place of Business

**2090 S NOVA RD
SUITE B-221
SOUTH DAYTONA FL 32119
US**

Mailing Address

**2090 S NOVA RD
SUITE B-221
SOUTH DAYTONA FL 32119
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **51-0180544**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FAIR, JEWELL L
2090 S NOVA RD
SUITE B-221
SOUTH DAYTONA FL 32119**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	LANDEGGER, GEORGE F.	
STREET ADDRESS	4 INTERNATIONAL DR.	
CITY-ST-ZIP	RYE BROOK NY	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	SCHWARTZ, ARTHUR L	
STREET ADDRESS	4 INTERNATIONAL DRIVE	
CITY-ST-ZIP	RYE BROOK NY	
TITLE	S	<input type="checkbox"/> Delete
NAME	FAIR, JEWELL	
STREET ADDRESS	2090 S NOVA RD SUITE B-221	
CITY-ST-ZIP	SOUTH DAYTONA FL 32119	
TITLE	DT	<input type="checkbox"/> Delete
NAME	LANDEGGER, CARL C	
STREET ADDRESS	150 E 52ND 27TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10022	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Jewell L Fair, Secretary 4/28/03 386-763-9220

CR2E037 (10/02)