

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 15, 2009
Secretary of State**

DOCUMENT# N07000006349

Entity Name: THE SEIDMAN FAMILY FOUNDATION, INC.

Current Principal Place of Business:

6734 NEWPORT LAKES CIRCLE
BOCA RATON, FL 33496

New Principal Place of Business:

Current Mailing Address:

6734 NEWPORT LAKES CIRCLE
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 26-0202846 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SEIDMAN, HARRY
6734 NEWPORT LAKES CIRCLE
BOCA RATON, FL 33496 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: DPT () Delete
Name: SEIDMAN, HARRY
Address: 6734 NEWPORT LAKES CIRCLE
City-St-Zip: BOCA RATON, FL 33496

Title: DSVP () Delete
Name: SEIDAM, AMY
Address: 6734 NEWPORT LAKES CIRCLE
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: SEIDAM, NICOLE
Address: 6734 NEWPORT LAKES CIRCLE
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DSVP (X) Change () Addition
Name: SEIDMAN, AMY
Address: 6734 NEWPORT LAKES CIRCLE
City-St-Zip: BOCA RATON, FL 33496

Title: D (X) Change () Addition
Name: SEIDMAN, NICOLE
Address: 6734 NEWPORT LAKES CIRCLE
City-St-Zip: BOCA RATON, FL 33496

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 SEIDMAN

DPT

04/15/2009

Electronic Signature of Signing Officer or Director

Date