

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000012304

**FILED**  
**Feb 16, 2012**  
**Secretary of State**

**Entity Name:** THE SAMUELS FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

5012 NW 24TH CIRCLE  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

5012 NW 24TH CIRCLE  
BOCA RATON, FL 33431

**New Mailing Address:**

**FEI Number:** 27-1602205

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REDGRAVE, ARTHUR R  
REDGRAVE AND ROSENTHAL LLP  
120 EAST PALMETTO PARK ROAD STE 400  
BOCA RATON, FL 33432 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:** SAMUELS, SHERRI L  
**Address:** 5012 NW 24TH CIRCLE  
**City-St-Zip:** BOCA RATON, FL 33431

**Title:** D  
**Name:** SAMUELS, JEFFREY K  
**Address:** 4326 TRANQUILITY DRIVE  
**City-St-Zip:** HIGHLAND BEACH, FL 33487

**Title:** D  
**Name:** SAMUELS-SWEET, VELIA  
**Address:** 4740 S OCEAN BLVD #905  
**City-St-Zip:** HIGHLAND BEACH, FL 33487

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:** JEFFREY K. SAMUELS

D

02/16/2012

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

\_\_\_\_\_  
Date