## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N17669

FILED Feb 26, 2007 Secretary of State

Entity Name: SELEVAN FAMILY FOUNDATION, INC.

Current Principal Place of Business:			New Principal Place of Business:		
4030 PHILL JACKSON\	.IPS HWY /ILLE, FL 32	207 US			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
PO BOX 55 JACKSON\	51260 VILLE, FL 32	255			
FEI Number:	59-2742007	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
5150 BELF BLDG 100	ER, MICHAEL ORT ROAD VILLE, FL 32				
The above in the State		submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPT ( SELEVAN, JAC 4030 PHILLIPS JACKSONVILL	S HIGHWAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DVS ( SELEVAN, RU 4030 PHILLIPS JACKSONVILL	S HIGHWAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( SELEVAN, RU 4030 PHILLIPS JACKSONVILL	S HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( SELEVAN, MA 4030 PHILLIPS JACKSONVILL	S HIGHWAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( SELEVAN, AN 4030 PHILLIPS JACKSONVILL	S HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JACK SELEVAN P 02/26/2007