2000 UNIFORM BUSINESS REPORT (UBR)

Feb 16, 2000 8:00 am Secretary of State DOCUMENT # **N94000004947** 02-16-2000 90014 015 ****61.25 THE A.L. LEVINE FAMILY FOUNDATION, INC. Principal Place of Business Mailing Address % PROSKAUER ROSE GOETZ & MENDELSOHN % PROSKAUER ROSE GOETZ & MENDELSOHN 2255 GLADES RD SUITE 340W 2255 GLADES RD SUITE 340W **BOCA RATON FL 33431** BOCA RATON FL 33431-7383 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0554692 Not Applicable Zin Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ESQ HOWARD ERDMAN, JOSEPH ESQ 2255 GLADES RD SUITE 340W **BOCA RATON FL** Zip Code 33431 BOCA RATON 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. **FEE IS \$61.25** Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition TITLE D ☐ Delete TITLE LEVINE, ARTHUR L ADUTE 46 WEST ULLMANN, ANTHONY R NAME NAME STREET ADDRESS STREET ADDRESS 10 OLD JACKSON AVE CITY-ST-ZIP WEST PATERSON NJ CITY-ST-ZIP HASTINGS NY 10706 Delete TITLE Change ☐ Addition TITLE STEIGER, CAROLE ANN NAME NAME STREET ADDRESS STREET ADDRESS 263 MANOR, RD - -CITY-ST-ZIP CITY-ST-ZIP RIDGEWOOD NJ 67456 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STEIGER, ANDREW R. NAME STREET ADDRESS STREET ADDRESS **70 APPLE RIDGE** CITY-ST-ZIP CITY-ST-ZIP WOODCLIFF LAKE NJ 07675 ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME STEIGER, ADAM J NAME STREET ADDRESS STREET ADDRESS **66 TIMBERLANE RD** CITY-ST-ZIP CITY-ST-ZIP **UPPER SADDLE RIVER NJ 07458** Delete TITLE ☐ Change Addition TITLE John da NAME STEIGER, DAVID L NAME . STREET ADDRESS STREET ADDRESS 35 MARKHAM CIR CITY-ST-ZIP CITY-ST-ZIP ENGLEWOOD NJ 07631 TITLE ☐ Delete TITLE ☐ Change Addition D LEVINE, PETER L STREET ADDRESS STREET ADDRESS **ROUTE 46 WEST**

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 that were described in the control of the corporation of the corporation of 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 that were accurate and that my name appears in Block 10 or Block 11 if

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SIGNATURE:

<u>WEST PATERSON NJ 07424</u>

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1/28/00

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