

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 09, 2000 8:00 am**  
**Secretary of State**

03-09-2000 90099 020 \*\*\*\*61.25

DOCUMENT # N97000007096

1. Entity Name

**THE SEIDLER FAMILY FOUNDATION, INC.**

00035031



DO NOT WRITE IN THIS SPACE

Principal Place of Business 5561 N.E. 31ST AVENUE FORT LAUDERDALE FL 33308	Mailing Address 5561 N.E. 31ST AVENUE FORT LAUDERDALE FL 33308-3413
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2. Principal Place of Business 1450 Bella Drive Suite, Apt. #, etc.	3. Mailing Address 1450 Bella Dr. Suite, Apt. #, etc.
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City & State Beverly Hills, CALIF	City & State Beverly Hills, CALIF	4. FEI Number 65-0801281	Applied For Not Applicable
Zip 90210	Country USA	Zip 90210	Country USA

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

SEIDLER, GARY  
 5561 N.E. 31ST AVENUE  
 FORT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEIDLER, LANA 5561 N.E. 31ST AVENUE FORT LAUDERDALE FL 33308 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEIDLER, GARY 5561 N.E. 31ST AVENUE FORT LAUDERDALE FL 33308 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHAYNE, RONALD 4560 S.W. 148 TERRACE PEMBROKE PINES FL 33027-3321 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Seidler, LANA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1450 Bella Drive Beverly Hills, CALIF. 90210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Seidler, Gary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1450 Bella Dr. Beverly Hills, CALIF 90210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 employment.

SIGNATURE: *GARY SEIDLER, U.P.* - 1-17-2000 310-246-1410  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

C:RZE037 19/99