

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000009219

Entity Name: SEIDE, INC.

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

12925 CLIFTON DRIVE
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

12925 CLIFTON DRIVE
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 80-0024173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHN PORTER ACCOUNTING, INC.
1403 W. BOYNTON BEACH BLVD., #9
BOYNTON BEACH, FL 33426 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SEIDE, MARIE K
Address: 12925 CLIFTON DRIVE
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: SEIDE, SANDY
Address: 12925 CLIFTON DR
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: SEIDE, JOANE
Address: 12925 CLIFTON DR
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: CICERON, FRANCETTE K
Address: 12925 CLIFTON DR
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIE K SEIDE

D

03/20/2009

Electronic Signature of Signing Officer or Director

Date