

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90145 020 ***150.00

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DOCUMENT # P97000020786

1. Entity Name

SELIGMAN FAMILY ENTERPRISES, INC.

Principal Place of Business

2441 N.W. 59TH STREET, #503
 BROKEN SOUND CLUBSIDE POINT
 BOCA RATON FL 33496

Mailing Address

2441 N.W. 59TH STREET, #503
 BROKEN SOUND CLUBSIDE POINT
 BOCA RATON FL 33496

BU00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

469 Woldunn Circle
 Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 952948
 Suite, Apt. #, etc.

City & State

Lake Mary, FL

City & State

Lake Mary, FL

4. FEI Number

65-0734372

Applied For

Not Applicable

Zip

32746

Country

USA

Zip

32745-2948

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ASARCH, STEVEN J
 1900 NW CORPORATE BLVD EAST
 SUITE 400, EAST
 BOCA RATON FL 33431-8512

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
 NAME **SELIGMAN, BESS J**
 STREET ADDRESS **2441 N.W. 59TH STREET, #503**
 CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE **PD** ☐ Delete
 NAME **SELIGMAN, HARRY L**
 STREET ADDRESS **P.O. BOX 952948**
 CITY-ST-ZIP **LAKE MARY FL 32746**

TITLE **VSD** ☐ Delete
 NAME **SOLOMON, ALLAN B**
 STREET ADDRESS **2200 N.W. CORPORATE BLVD., #310**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP **32745-2948**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Harry L. Seligman
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/1/2002

Daytime Phone #

(407) 330 9273

CR2E034 (9/01)