

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000000920

**FILED  
Apr 26, 2013  
Secretary of State  
CC4453146279**

**Entity Name:** ALBERT W. BADER FOUNDATION, INC.

**Current Principal Place of Business:**

SUNTRUST FINANCIAL CENTER  
401 EAST JACKSON STREET, SUITE 1700  
TAMPA, FL 33602

**Current Mailing Address:**

SUNTRUST FINANCIAL CENTER  
401 EAST JACKSON STREET, SUITE 1700  
TAMPA, FL 33602

**FEI Number:** 26-1860514

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPDIRECT AGENTS, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title D  
Name MANDELOFF, ALAN H  
Address 1800 JFK BLVD., 20TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19103

Title D  
Name FITZGERALD, RICHARD  
Address 1057 CLOVERNOOK AVENUE  
City-State-Zip: BENSALEM PA 19020

Title D  
Name BOGAN, JAMES  
Address 281 CHARLES STREET  
City-State-Zip: SOUTHAMPTON PA 18966

*I hereby 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 all other like empowered.*

**SIGNATURE:** ALAN H. MANDELOFF

D

04/26/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date