

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000001150

**Entity Name:** MARC J. LEDER FOUNDATION, INC.

**Current Principal Place of Business:**

C/O SUN CAPITAL PARTNERS, INC.  
5200 TOWN CENTER CIR. 4TH FLOOR  
BOCA RATON, FL 33486

**Current Mailing Address:**

C/O SUN CAPITAL PARTNERS, INC.  
5200 TOWN CENTER CIR. 4TH FLOOR  
BOCA RATON, FL 33486 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
C/O C T CORPORATION SYSTEM  
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           DIRECTOR  
Name           CALHOUN, KEVIN J.  
Address        5200 TOWN CTR. CIR, STE 600  
City-State-Zip: BOCA RATON FL 33486

Title           DIRECTOR  
Name           KROUSE, RODGER R.  
Address        5200 TOWN CENTER CIRCLE, STE  
                  600  
City-State-Zip: BOCA RATON FL 33486

Title           DIRECTOR  
Name           LEDER, MARC J.  
Address        5200 TOWN CENTER CIRCLE, STE  
                  600  
City-State-Zip: BOCA RATON FL 33486

*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:** RODGER R. KROUSE

**DIRECTOR**

**01/03/2024**

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

\_\_\_\_\_  
Date