

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000008495

Entity Name: ALAN J. ANDERSON FOUNDATION, INC.**Current Principal Place of Business:**2845 NE 9TH STREET, SUITE 606
FORT LAUDERDALE, FL 33304**Current Mailing Address:**2845 NE 9TH STREET, SUITE 606
FORT LAUDERDALE, FL 33304 US**FEI Number:** 84-2736455**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ANDERSON PENLEY, LAUREN
2845 NE 9TH STREET, SUITE 606
FORT LAUDERDALE, FL 33304 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 ANDERSON PENLEY, LAUREN
Address 2845 NE 9TH STREET, SUITE 606
City-State-Zip: FORT LAUDERDALE FL 33304

Title D/CT
Name MINARDI, DANA
Address 611 MCCARTHY DRIVE
City-State-Zip: NEW MILFORD NJ 07636

Title D/VP
Name ANDERSON, CHRISTOPHER
Address 140 GLEN ROAD
City-State-Zip: WOODCLIFF LAKE NJ 07677

Title D/CT
Name ANDERSON, RICHARD
Address 140 GLEN ROAD
City-State-Zip: WOODCLIFF LAKE NJ 07677

Title D/P
Name FRIEDMAN, ROBERT
Address 701 BRICKELL AVE, SUITE 3300
City-State-Zip: MIAMI FL 33131

Title DCIO
Name MINARDI, MICHAEL
Address 611 MCCARTHY DRIVE
City-State-Zip: NEW MILFORD NJ 07636

Title D/S
Name ANDERSON, JILLIAN
Address 140 GLEN ROAD
City-State-Zip: WOODCLIFF LAKE NJ 07677

Title D
Name PICCOLO, MICHAEL
Address 317 CANTERBURY DRIVE
City-State-Zip: RAMSAY NJ 07446

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: ROBERT FRIEDMAN**PRESIDENT****06/09/2020**

Electronic Signature of Signing Officer/Director Detail

Date