

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000023774

FILED
Jun 16, 2010
Secretary of State

Entity Name: STIEFEL RESEARCH INSTITUTE, INC.

Current Principal Place of Business:

255 ALHAMBRA CIRCLE
1000
CORAL GABLES, FL 33134

New Principal Place of Business:

ONE FRANKLIN PLAZA
PHILADELPHIA, PA 19101

Current Mailing Address:

255 ALHAMBRA CIRCLE
1000
CORAL GABLES, FL 33134

New Mailing Address:

ONE FRANKLIN PLAZA
PHILADELPHIA, PA 19101

FEI Number: 20-4404150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: PD
Name: HUMPHRIES, WILLIAM
Address: ONE FRANKLIN PLAZA
City-St-Zip: PHILADELPHIA, PA 19101

Title: VSD
Name: MOSHER, WILLIAM
Address: ONE FRANKLIN PLAZA
City-St-Zip: PHILADELPHIA, PA 19101

Title: T
Name: KLIJIAN, AUDREY
Address: ONE FRANKLIN PLAZA
City-St-Zip: PHILADELPHIA, PA 19101

Title: AT
Name: LYONS, JAN C
Address: ONE FRANKLIN PLAZA
City-St-Zip: PHILADELPHIA, PA 19101

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

SIGNATURE: JAN C. LYONS

AT

06/16/2010

Electronic Signature of Signing Officer or Director

Date