

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A92000000102

1. Entity Name

FLORIDA PANTHERS HOCKEY CLUB, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -2 PM 1:33

Principal Place of Business

200 S. ANDREWS AVE., 6TH FLOOR
FT. LAUDERDALE FL 33301

Mailing Address

200 S. ANDREWS AVE., 6TH FLOOR
FT. LAUDERDALE FL 33301-1864



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

One Panther Parkway
Suite, Apt. #, etc.

3. Mailing Address

P. O. Box 5025
Suite, Apt. #, etc.

Corporate Office

City & State

Sunrise, FL

City & State

Boca Raton, FL

4. FEI Number

65-0401302

Applied For

Not Applicable

Zip

Country

33323

Zip

Country

33431

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AMERICAN INFORMATION SERVICES, INC.
1 SE 3RD AVE., 28TH FLOOR
MIAMI FL 33131

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. Capital Contributions
as Shown on record.

\$100.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$100.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # P92000008428
NAME FLORIDA PANTHERS HOCKEY CLUB, INC.
STREET ADDRESS 200 S. ANDREWS AVE.
CITY - ST - ZIP FT. LAUDERDALE FL

STREET ADDRESS 501 E. Camino Real - Corporate Office
CITY - ST - ZIP Boca Raton, FL 33432

DOCUMENT #
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STREET ADDRESS
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14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Signature
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-28-00

Date

561-447-5300

Daytime Phone #

10-16 2000-16