

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90082 037 ****61.25

DOCUMENT # N48080

1. Entity Name

THE DAN MARINO FOUNDATION, INC.

Principal Place of Business

**1063 SHOTGUN ROAD
 SUNRISE FL 33326
 US**

Mailing Address

**1063 SHOTGUN ROAD
 SUNRISE FL 33326
 US**

C0021864



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2500 WESTON ROAD

3. Mailing Address

2500 WESTON ROAD

Suite, Apt. #, etc.

SUITE 403

Suite, Apt. #, etc.

SUITE 403

City & State

WESTON, FLORIDA

City & State

WESTON, FLORIDA

4. FEI Number

65-0320556

Applied For

Not Applicable

Zip

33331

Country

USA

Zip

33331

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**SHERMAN, CRAIG B.
 1000 CORPORATE DR., STE 310
 FORT LAUDERDALE FL 33334**

7. Name and Address of New Registered Agent

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

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DB C	☐ Delete
NAME	MARINO, DANIEL C., JR.	
STREET ADDRESS	1063 SHOTGUN ROAD 2500 WESTON RD, #403	
CITY-ST-ZIP	SUNRISE FL 33326 WESTON, FL. 33331	
TITLE	SD / TREASURER T	☐ Delete
NAME	MARINO, CLAIRE D.	
STREET ADDRESS	1063 SHOTGUN ROAD 2500 WESTON RD. #403	
CITY-ST-ZIP	SUNRISE FL 33326 WESTON, FL. 33331	
TITLE	D	☒ Delete
NAME	SHERMAN, CRAIG B.	
STREET ADDRESS	1000 CORPORATE DR., STE 310	
CITY-ST-ZIP	FORT LAUDERDALE FL 33334	
TITLE	D	☒ Delete
NAME	FRAENKEL, FRANCIS L.	
STREET ADDRESS	745 FIFTH AVE 26TH FL	
CITY-ST-ZIP	NEW YORK NY	
TITLE	D	☒ Delete
NAME	DEMOFF, MARVIN A.	
STREET ADDRESS	11377 W OLYMPIC BLVD	
CITY-ST-ZIP	LOS ANGELES CA	
TITLE	CHIEF EXECUTIVE OFFICER	☐ Delete
NAME	MARY PARTIN	
STREET ADDRESS	2500 WESTON ROAD, SUITE 403	
CITY-ST-ZIP	WESTON, FL. 33331	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	(CHAIRMAN) C/D	☒ Change ☐ Addition
NAME	MARINO, DANIEL C. JR.	
STREET ADDRESS	2500 WESTON RD. #403	
CITY-ST-ZIP	WESTON, FL. 33331	
TITLE	S/T/D	☒ Change ☐ Addition
NAME	MARINO, CLAIRE D.	
STREET ADDRESS	2500 WESTON RD. #403	
CITY-ST-ZIP	WESTON, FL. 33331	
TITLE	D	☐ Change ☒ Addition
NAME	MARINO, DANIEL, SR.	
STREET ADDRESS	2500 WESTON RD. #403	
CITY-ST-ZIP	WESTON, FL. 33331	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	M	☐ Change ☒ Addition
NAME	MARY PARTIN	
STREET ADDRESS	2500 WESTON RD. #403	
CITY-ST-ZIP	WESTON, FL. 33331	

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY PARTIN **2/12/01 (954) 385-4696**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)