2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# N48080

Entity Name: THE DAN MARINO FOUNDATION, INC.

Current Principal Place of Business:

1335 SHOTGUN RD.
SUNRISE, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 267640
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 65-0320556 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHERMAN, CRAIG B
1000 CORPORATE DR., STE 310
FORT LAUDERDALE, FL 33334 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: CD ( ) Delete
Name: MARINO, DANIEL C JR
Address: PO BOX 267640
City-St-Zip: WESTON, FL 33326

Title: STD ( ) Delete
Name: MARINO, CLAIRE D
Address: PO BOX 267640
City-St-Zip: WESTON, FL 33326

Title: D ( ) Delete
Name: MARINO, DANIEL SR
Address: PO BOX 267640
City-St-Zip: WESTON, FL 33326

Title: M (X) Delete
Name: PARTIN, MARY
Address: PO BOX 267640
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: M (X) Change ( ) Addition
Name: PARTIN, MARY
Address: PO BOX 267640
City-St-Zip: WESTON, FL 33326

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARY PARTIN M 01/07/2008

Electronic Signature of Signing Officer or Director — Date