

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90173 015 *****61.25

DOCUMENT # N48080

1. Entity Name
THE DAN MARINO FOUNDATION, INC.



Principal Place of Business

**2500 WESTON ROAD
SUITE 403
FORT LAUDERDALE FL 33331
US**

Mailing Address

**2500 WESTON ROAD
SUITE 403
FORT LAUDERDALE FL 33331
US**

2. Principal Place of Business

1335 SHOTGUN ROAD

3. Mailing Address

P.O. BOX 267640

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SUNRISE, FLORIDA

City & State

WESTON, FLORIDA

Zip

33326

Country

USA

Zip

33326

Country

USA

4. FEI Number **65-0320556**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES



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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **CD** ☐ Delete
NAME **MARINO, DANIEL C., JR.**
STREET ADDRESS **2500 WESTON ROAD # 403**
CITY-ST-ZIP **WESTON FL 33331**

TITLE **STD** ☐ Delete
NAME **MARINO, CLAIRE D.**
STREET ADDRESS **2500 WESTON ROAD # 403**
CITY-ST-ZIP **WESTON FL 33331**

TITLE **D** ☐ Delete
NAME **MARINO, DANIEL SR**
STREET ADDRESS **2500 WESTON ROAD # 403**
CITY-ST-ZIP **WESTON FL 33331**

TITLE **M** ☐ Delete
NAME **PARTIN, MARY**
STREET ADDRESS **2500 WESTON ROAD # 403**
CITY-ST-ZIP **WESTON FL 33331**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **P.O. BOX 267640**
CITY-ST-ZIP **ZIP 33326**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **P.O. BOX 267640**
CITY-ST-ZIP **33326**

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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**

1-16-03 954-888-1771

CR2E037 (10/02)