SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED Jul 25 1997 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # N96000005206 (5) CANON H. BAXTER LIEBLER FOUNDATION, INC. Principal Place of Business Mailing Address 6510 S.W. 93 AVENUE 6510 S.W. 93 AVENUE MIAMI FL 33173 MIAMI FL 33173 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 10/10/1996 4 FEI Number 2. Principal Place of Business 2a. Malling Address Applied For 21 <u> 31-1542730</u> Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible Yes □ No Personal Property Tax due June 30. 29 24 25 30 Name and Address of Current Registered Agent Name and Address of New Registered Agent Name MILIAN, DAVID P ESQ. Street Address (P.O. Box Number is Not Acceptable) 82 2800 FIRST UNION FINANCIAL CENTER 200 S. BISCAYNE BLVD. MIAMI FL 33131-2335 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE 1.1 TITLE Change NAME LIEBLER, ROBERT F 1.2 NAME 81 Drive 6510 S.W. 93 AVENUE STREET ADORESS 1.3 STREET ADDRESS **MIAMI FL 33173** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Director Change Addition MACTONELL, Walter E. NAME LIEBLER, JANICE R 2.2 NAME ANTHORNIA TO SW 48 STREET 6510 S.W. 93 AVENUE STREET ADDRESS 2.3 STREET ADDRESS Miamilianismus FL 33155 MIAMI FL 33173 CITY-ST-ZIP 2.4 CITY-ST-ZIP Addition DELETE TITE F 3.1 TITLE Change Director MILIAN, DAVID P Bode, Martha NAME 32 NAME 200 S. BISCAYNE BLVD., #2800 3425 NW 3 rd Storeet STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33131-2335 CITY-ST-ZIP 3.4. CITY - ST - 7IP MIAML FL DELETE Change ☐ Addition TITLE 4.1 TITLE NAME LIEBLER, MATTHEW B 4.2 NAME

CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that the Information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated on this annual eport or supplements annual 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 composition by the receipt of the property of the receipt of the same legal effect as if made under oath; that I am an officer or director of the composition of the receipt of the r

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5.1 TITLE

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SIGNATURE:

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MALLIF

1017 MERCHANTS WAY, APT. 2-B

CHESAPEAKE VA 23320

590 KANE CREEK BLVD.

LIEBLER, JOAN E

MOAB UT 84532

July 17 1997

Change

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Addition

Addition

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