

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 13, 2002 8:00 am**  
**Secretary of State**

03-13-2002 90054 034 \*\*\*\*61.25

**DOCUMENT # N98000002482**

1. Entity Name  
**THE CATHERINE SCRIPPS RODRIGUEZ FAMILY FOUNDATIO  
 N, INC.-**

Principal Place of Business <b>LINDA FRANCISOVICH V.P. US TRUST COMP          114 W 47 STREET          NEW YORK NY 10036</b>	Mailing Address <b>LINDA FRANCISOVICH V.P. US TRUST COMP          114 W 47 STREET          NEW YORK NY 10036</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
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4. FEI Number <b>65-0831285</b>	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**FORBES, PHILIP H  
 C/O BUTZEL LONG, SUITE 411  
 1200 NORTH FEDERAL HIGHWAY  
 BOCA RATON FL 33432**

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable.

**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		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PTD SCRIPPS RODRIGUEZ, CATHERINE C/O BUTZEL LONG, SUITE 411 BOCA RATON FL 33432</b>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VSD LOUD, SAMANTHA C C/O BUTZEL LONG, SUITE 411 BOCA RATON FL 33432</b>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD LOUD, SHAWN M C/O BUTZEL LONG, SUITE 411 BOCA RATON FL 33432</b>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD RODRIGUEZ, ISMAEL C/O BUTZEL LONG, SUITE 411 BOCA RATON FL 33432</b>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: CATHERINE SCRIPPS RODRIGUEZ CATHERINE SCRIPPS RODRIGUEZ Jan 8, 2002  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)

UNITED STATES TRUST COMPANY  
OF NEW YORK

114 WEST 47<sup>TH</sup> STREET  
NEW YORK, NY 10036-1532  
TELEPHONE: 212-852-3294  
FAX: 212-852-3377  
E-MAIL: ALANE@USTRUST.COM

ANDREW D. LANE  
ASSISTANT VICE PRESIDENT  
PHILANTHROPIC ADVISORY SERVICES

423867

**U.S. TRUST**

February 27, 2002

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Attn: Ms. Eula Peterson  
Reinstatements Section

Re: The Catherine Scripps Rodriguez Family Foundation, Inc.  
Reference #N98000002482

Dear Ms. Peterson:

Enclosed is a copy of the above-captioned corporation's 2002 Uniform Business Report and a new check for \$61.25 payable to "Department of State." As we discussed today over the telephone, this is a bank check, and therefore the amount of the check appears only in numeric form.

Please let me know if you have questions. Thanks again for your assistance.

Very truly yours,

*Andrew D. Lane*

Enclosures