

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000011142

Entity Name: THE UNDERLINE MANAGEMENT ORGANIZATION, INC.**Current Principal Place of Business:**1800 SW 1ST AVE.
SUITE #504
MIAMI, FL 33129**Current Mailing Address:**1800 SW 1ST AVE.
SUITE #504
MIAMI, FL 33129 US**FEI Number:** 81-4728090**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DALY, MARGARET
1800 SW 1ST AVE.
SUITE #504
MIAMI, FL 33129 US*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:** MARGARET DALY

04/07/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name DALY, MARGARET
Address 1800 SW 1ST AVE.
SUITE #504
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name TERRONE, ROGER
Address 1800 SW 1ST AVE.
SUITE #504
City-State-Zip: MIAMI FL 33129

Title VC
Name BLUMBERG, STUART
Address 1800 SW 1ST AVE.
SUITE #504
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name BELL, JASON
Address 1800 SW 1ST AVE.
SUITE #504
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name WALFORD, KEVIN
Address 1800 SW 1ST AVE.
SUITE #504
City-State-Zip: MIAMI FL 33129

Title SECRETARY
Name CARDENAS, DAVID
Address 1800 SW 1ST AVE.
SUITE #504
City-State-Zip: MIAMI FL 33129

Title VC
Name TALLMAN, NICOLE
Address 1800 SW 1ST AVE.
SUITE #504
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name PERDOMO, GRACE
Address 1800 SW 1ST AVE.
SUITE #504
City-State-Zip: MIAMI FL 33129

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I hereby 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 all other like empowered.

SIGNATURE: MARGARET DALY

DIRECTOR

04/07/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	VACANT, VACANT
Address	1800 SW 1ST AVE. SUITE #504
City-State-Zip:	MIAMI FL 33129