FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 720138 (7)

1. Corporation Name

THE ORANGE BOWL COMMITTEE, INC.

Principal Place of Business	Mailing Address
601 BRICKELL KEY DR. STE 206 MIAMI FL 33131	601 BRICKELL KEY DR. STE 206 MIAMI FL 33131

3. Date Incorporated or Qualified: **01/28/1971**
3a. Date of Last Report: **04/17/1995**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: **59-0384382** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

TRIBBLE, KEITH
601 BRICKELL KEY DR, STE 206
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

200001956982
-09/25/96--01092--022
*****61.25 *****61.25

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 _____ DATE
Signature, typed or printed name of registered agent and title of officer (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	P/D	☒ Change ☐ Addition
NAME	KUBIT, DONALD		1.2 NAME	Cooke, Clark	
STREET ADDRESS	175 NW 1ST AVENUE, 11TH FLOOR		1.3 STREET ADDRESS	190 NE 3rd Street	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	Miami, Fl	
TITLE	PED	☐ DELETE	2.1 TITLE	V/D	☒ Change ☐ Addition
NAME	COOK, CLARK		2.2 NAME	Leslie V. Pantin	
STREET ADDRESS	190 NE 3RD STREET		2.3 STREET ADDRESS	1000 Brickell Ave. Ste 340	
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	Miami, Fl 33131	
TITLE	SD	☒ DELETE	3.1 TITLE	V/D	☐ Change ☒ Addition
NAME	MENDOZA, CRISTINA		3.2 NAME	Edgar C. Sowa, JR	
STREET ADDRESS	ONE HERALD PLAZE		3.3 STREET ADDRESS	201 S. Biscayne Blvd. Ste 7180	
CITY-ST-ZIP	MIAMI FL		3.4 CITY-ST-ZIP	Miami, Fl 33131	
TITLE	TD	☐ DELETE	4.1 TITLE	S	☐ Change ☒ Addition
NAME	ELLYSON, ROBERT C		4.2 NAME	Susan Aller Norton	
STREET ADDRESS	601 BRICKELL KEY DRIVE, SUITE 206		4.3 STREET ADDRESS	121 Majorca Ave	
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP	Coral Gables, Fl 33134	
TITLE	VD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	DOTSON, ALBERT		5.2 NAME		
STREET ADDRESS	17901 SW 78TH AVE.		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP	JB 9-16-96	

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert C. Ellyson — Robert C. Ellyson — 4/4/96 — 305-371-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #