FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 720138

(7)

THE ORANGE BOWL COMMITTEE, INC.

1112 01	MITGE BOTTE COMMITTEE	, 110			
		Mailing Address			I DEDIK INDIA INDIA INDIA DANA KABU BINDI BINDI DIDIL
601 BRICKELL KEY DR. STE 206 MIAMI FL 33131		601 BRICKELL KEY DR. STE 206 MIAMI FL 33131-2652			
					3. Date Incorporated or Qualified 01/28/1971 3a. Date of Last Report 09/06/1996
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21	11 -1-	26			59-0384382 Not Applicat
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Regulred
City & State)	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Ζιρ	Country Zip		Count	ry	8. This corporation has liability for intangible tax under s. 199.032,
24	9. Name and Address of Curre	29 nt Registered Agent	30		Florida Statutes Yes No 10, Name and Address of New Registered Agent
	S. Hallie Bild Addless of Collec	It uedietelen währt	8	Name	
TRIBBLE,	KEITH		-		(0.000)
	CKELL KEY DR, STE 206		8:	2 Street	t Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33131			8	3	
			8	4 City	85 Zip Code
					FL ``
11. Pursuant I	to the provisions of Sections 617.050	2 and 617.1508, Florida Status of Florida Status	utes, the abo	ve-named	d corporation submits this statement for the purpose of changing its registere prporation's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 617.0503, F	Iorida Statut	BS.	
SIGNATURE		Chic	NE DISTRICT		ure required when reinstating) DATE
12.	Signature, typind or printed name of registered ag OFFICERS AN	ID DIRECTORS	13,	geric signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		
NAME	COOK, CLARK	^	1.2 NAME	•	Partia, Leslie V
STREET ADDRESS	190 NE 3RD STREET		1.3 STRE	ET ADDRESS	1000 Bushell AUE, , STE STO
CITY - ST - ZIP	MIAMI FL		1.4 CITY	-ST-ZIP	Postia, Leslie V 1000 Bushell Ave., 542340 Myri, Fl 33131
TITĿ€	TD	☐ DELETE	2.1 TITLE		L.J Change L.J Additi
NAME	ELLYSON, ROBERT C		2.2 NAM		
STREET ADDRESS	601 BRICKELL KEY DRIVE, S	UITE 206		ET ADDRESS	3
CITY+ST+ZIP TITLE	MIAMI FL VD	DELETE	2. 4 City 3.1 Title		Change Addit
NAME	DOTSON, ALBERT	_ otteric	3.2 NAME		Charge Establish
STREET ADDRESS	17901 SW 78TH AVE.			- et address	
C+TY-ST-ZIP	MIAMI FL		3.4. CITY		
TITLE	VD	DELETE	4.1 TITLE		Change Addit
NAME	PANTIN, LESLIE V		4. 2 NAM	ΙE	
STREET ADDRESS	1000 BRICKELL AVE., STE. 3	40	4.3 STRE	et address	S
CITY - ST - ZIP	MIAMI FL 33131		4.4 CITY		
TITLE	VD	☐ DELETE	5.1 TITLE		Change Addit
NAME	JONES, EDGAR C JR.	T 0400	5.2 NAMI		
STREET ADDRESS	201 S. BISCAYNE BLVD., ST	E. 3180		ET ADDRESS	
CITY-ST-ZIP TITLE	MIAMI FL 33131 S	☐ DELETE	5.4 CITY 6.1 TITLE		Change Addit
NAME	NORTON, SUSAN POTTER		6.2 NAM		been
STREET ADDRESS	121 MAJORCA AVE			ET ADDRESS	3
CHTY-ST-ZIP	CORAL GABLES FL 33134		6.4 CITY		
14. I do heret	by certify that the information supplie	ed with this filing does not qua	alify for the ex	emption s	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the
Lam an o		r the receiver or trustee empo	owered to exe		nd that my signature shall have the same legal effect as if made under oath; t s report as required by Chapter 617, Florida Statutes; and that my name

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF STOMMEN OF PRINTED NAME OF STOMMEN OF DIRECTOR DATE OF DATE PROPERTY OF DATE PROPERTY OF DATE OF DATE PROPERTY OF DATE OF DA